2002 Uniform Business Report (UBR)

Apr 15, 2002 8:00 am Secretary of State P96000049725 **DOCUMENT #** 1. Entity Name SAI ENGINEERING, INC. 04-15-2002 90025 044 ***158.75 Principal Place of Business Mailing Address 68 S. IVANHOE BLVD. 68 S. IVANHOE BLVD. ORLANDO FL 32804-6441 ORLANDO FL 32804-6441 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3477541 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent-=7.-Name and Address of New Registered Agent == Name STROLLO, J P Street Address (P.O. Box Number is Not Acceptable) 68 S IVANHOE BLVD ORLANDO FL 32804-6441 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE (9/01) ☐ Delete TITLE President Change ▲ Addition STROLLO, J.P. NAME NAME Giacomo Michael Pasquale Strollo STREET ADDRESS 777 FRENCH AVE STREET ADDRESS 777 French Avenue WINTER PARK FL 32789 CITY-ST-7IP CITY-ST-ZIP Winter Park, FLorida 32789 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STROLLO, CYNTHIA A NAME STREET ADDRESS 777 FRENCH AVE STREET ADDRESS CITY_ST-ZIP .. WINTER PARK FL 32789 CITY-ST-ZIP... TITLE Delete ☐ Change ☐ Addition NAME STROLLO, LAWRENCE A NAME STREET ADDRESS 276 RIVER ROAD W. STREET ADDRESS CITY-ST-ZIP MANAKIN-SABOT VA 23103-0262 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME PASLICK, MAURY R P.E. NAME STREET ADDRESS 15437 BEACHVIEW DR. STREET ADDRESS CITY-ST-ZIP MONTCLAIR VA 22026-1024 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME ZITO, DANIEL L NAME STREET ADDRESS 12703 TORRINGTON ST. STREET ADDRESS CITY-ST-ZIP Lakeridge va 22192 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

changed, or on an attachment with