

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000053530 (7)**

1. Corporation Name
SA & SA CORP.

Principal Place of Business
2333 BRICKELL AVENUE
MEZZ. SUITE
MIAMI FL 33129

Mailing Address
2333 BRICKELL AVENUE
MEZZ. SUITE
MIAMI FL 33129-2435



2. Principal Place of Business 21 2256 NW 20 street		2a. Mailing Address 26 2256 NW 20 street		3. Date Incorporated or Qualified 06/24/1996	3a. Date of Last Report
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number 65-0677634	Applied For Not Applicable
23 City & State MIAMI, Florida		28 City & State MIAMI, Florida		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
24 Zip 33142	25 Country Dade	29 Zip 33142	30 Country Dade	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

9. Name and Address of Current Registered Agent RIVERA, IRENE 2333 BRICKELL AVENUE MEZZ. SUITE MIAMI FL 33129		10. Name and Address of New Registered Agent 81 Name Eugenio Sanchez 82 Street Address (P.O. Box Number is Not Acceptable) 9369 Fontainebleau Blvd. # J-209 83 84 City MIAMI FL 85 Zip Code 33172	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE:  DATE: **4/23/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE VICE-PRESIDENT/SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SORDO, MARIA P		1.2 NAME SORDO, MARIA P.	
STREET ADDRESS 2333 BRICKELL AVENUE, MEZZ SUITE		1.3 STREET ADDRESS 9369 Fontainebleau Blvd. # J-209	
CITY- ST- ZIP MIAMI FL 33129		1.4 CITY- ST- ZIP MIAMI, FLA 33172	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE PRESIDENT/TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME EUGENIO SANCHEZ	
STREET ADDRESS		2.3 STREET ADDRESS 9369 Fontainebleau Blvd. # J-209	
CITY- ST- ZIP		2.4 CITY- ST- ZIP MIAMI, FLORIDA 33172	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME DANIEL SANCHEZ	
STREET ADDRESS		3.3 STREET ADDRESS 9369 Fontainebleau Blvd. # J-209	
CITY- ST- ZIP		3.4 CITY- ST- ZIP MIAMI, FLORIDA 33172	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **Eugenio Sanchez/President** DATE: **4/23/97** (305) 636-5464

CR2E034 (9/96)