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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074755 (5)

SAUTE 2, INC.

Principal Place of Business

Mailing Address

FILED May 13 1998 8:00am Secretary of State



7736 BLIND PASS ROAD ST. PETERSBURG BEACH FL 33706		7736 BLIND PASS ROAD ST. PETERSBURG BEACH FL 33706		6				
					DO NOT WRITE IN THIS S	PACE		
					3, Date Incorporated or Qualified 09/09/1996			
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For	
21		26			59-3401402			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional	
22		27			g. Certificate of Status Desired	Fee Re	equired	
City & State	9	City & State			6, Election Campaign Financing		Мау Ве	
23 Zin		28			Trust Fund Contribution		to Fees	
Žip	Country	Zφ	Cou	ntry	8. This corporation owes or has paid the curr			
24	25 g. Name and Address of Curre	nt Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered A		J №	
MV	ER\$, ROBERT J	The state of the s		B1 Name	ID, Harro and Address of Hote Hegisteres P	- Igoni		
	1.4140							
	5 Pasadena avenue south Petersburg FL 33707	T 140	140		82 Street Address (P.O. Box Number is Not Acceptable)			
01.	retensbond to 33707			83				
			ļ			·		
				84 City	FL	85 Zip	Code	
11. Pursuant t	o the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the at	ove-named co	rporation submits this statement for the purpose of	changing if	ts registered	
office or re	egistered agent, or both, in the State	e of Florida, Such change was a	uthorized	by the corpora	ation's board of directors. I hereby accept the appointment of the directors of the appointment of the appoi	ointment as	registered	
-	trialisma with and decept the dang	gations of, decement dor.dbob, the	nica stat	ines.				
SIGNATURE	Signature, typed or printed name of registered ag	part and title if approable (NOTE	: Flegistered	Agent signature requ	uired when reinstating) DATE			
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12	
TITLE	PVST	DELETE	1.1 111	LE		Change	Addition	
NAME	DONALDSON, ANGUS		1.2 NA	ME				
STREET ADDRESS	7465 BAY ISLAND DRIVE SO	OUTH BARBADOS 213	1.3 ST	REET ADDRESS				
CITY-ST-ZIP	PASADENA FL 33707		1.4 CI	Y-ST-ZIP				
TITLE	D	DELETE	2.1 (1)	LE		☐ Change	Addition	
NAME	DONALDSON, ANGUS		2.2 NA	ME				
STREET ADDRESS	7465 BAY ISLAND DRIVE SO	OUTH BARBADOS 213	2.3 ST	REET ADDRESS				
CITY-ST-ZIP	PASADENA FL 33707		2. 4 CI	TY-ST-ZIP				
TITLE		DELETE	3.1 TIT	LE		Change	Addition	
NAME			3.2 NA	ME				
STREET ADDRESS			33 ST	REET ADDRESS				
CITY-ST-ZIP			3.4. CI	TY-ST-ZIP				
TITLE		DELETE	4 1 TH	LE		Change	Addition	
NAME			4. 2 N/	ME				
STREET ADDRESS			4.3 ST	REET ADDRESS				
CITY-ST-ZIP			4.4 CII	Y-ST-ZIP				
TITLE		DELETE	5.1 Til	LE		Change	Addition	
NAME			5.2 NA	ME				
STREET ADDRESS	•		5.3 \$1	REET ADDRESS				
CITY-ST-ZIP			5.4 CIT	Y - ST - ZIP				
TITLE	-	DELETE	6.1 TIT	LE		Change	☐ Addition	
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 \$1	REET ADDRESS				
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP				
14. I hereby or	ertify that the information supplied v	with this filing does not qualify for	r the exe	mption stated in	n Section 119.07(3)(i), Florida Statutes. I further cer ture shall have the same legal effect as if made und	tify that the	information	
officer or o	director of the corporation or the record Block 13 if changed, or on an atta	eiver or trustee empowered to e	execute th	nis report as red	quired by Chapter 607, Florida Statutes; and that m	y name api	pears in	