2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 12, 2001 8:00 am DOCUMENT # P97000072270 Secretary of State S.A.A. ENTERPRISES, INC. 05-12-2001 90005 009 ***150.00 Principal Place of Business Mailing Address 415 L'Ambiance Drive 415 L'Ambiance Drive Longboat Key, FL 34228 Longboat Key, FL 34228 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 59-3466358 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Ronald G. Brown Street Address (P.O. Box Number is Not Acceptable) 415 L'Ambiance Drive, Penthouse C Longboat Key, Florida 34228 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1: 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. DPT X Change ☐ Addition X Delete TITLE Beverly Brown NAME Ronald G. Brown 415 L'Ambiance Drive, PH-C STREET ADDRESS STREET ADDRESS 415 L'Ambiance Drive, PH-C CITY-ST-ZIP CITY-ST-ZIP Longboat Key, FL 34228 Longboat Key, FL 34228 D. VP S ☐ Change X Addition Delete TITLE NAME Deborah J. Ferro 8022 Whiskey Pond Lane STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Sarasota, FL 34240 CITY-ST-ZIP . Change _ XAddition TITLE Delete TITLE -. Rhonda Johnson NAME NAME STREET ADDRESS 4325 Trillium Lane West STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Minnetrispa, MN 55364 ☐ Delete Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS DITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DITY-ST-ZIP

3. 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 supplied entail 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 reserver of 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 changed, or on an attackment with an address, with all either like empowered.

CITY-ST-7IP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

TILE

IAME

TREET ADDRESS

ITY-ST-7IP

R PRINTED NAME OF SIGNING OFFICER O

☐ Delete

(941) 387-8118

☐ Change

Addition