

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Sep 15, 1999 8:00 am**  
**Secretary of State**

09-15-1999 90009 035 \*\*\*550.00

DOCUMENT # **P97000092636**

1. Corporation Name

**SADIR INVESTMENT GROUP, INC.**



Principal Place of Business

**5530 N.W. 44TH STREET  
SUITE C-316  
LAUDERHILL FL 33319**

Mailing Address

**2025 BRICKELL AVE  
SUITE 2005  
MIAMI FL 33129**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/28/1997**

4. FEI Number

**65-0790875**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

**21 38 S.W. 8TH STREET**

2a. Mailing Address

**26 38 S.W. 8TH STREET**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22 MIAMI FL**

27

City & State

City & State

**23 MIAMI FL**

28

Zip

Country

**24 33130**

**25 USA**

Zip

Country

**29 33130**

**30 USA**

9. Name and Address of Current Registered Agent

**GARCIA ORTEZ, RICARDO  
2025 BRICKELL AVENUE  
SUITE 2005  
MIAMI FL 33129**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE

NAME **BAR-YEFET, ADI**  
STREET ADDRESS **5530 N.W. 44TH STREET SUITE C316**  
CITY-ST-ZIP **LAUDERHILL FL 33319**

TITLE **SVD** ☐ DELETE

NAME **GARCIA, RICARDO O**  
STREET ADDRESS **2025 BRICKELL AVE. SUITE 2005**  
CITY-ST-ZIP **MIAMI FL 33129**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **PSVD**

2.3 STREET ADDRESS **GARCIA, RICARDO O**

2.4 CITY-ST-ZIP **2025 BRICKELL AVE, STE 2005**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME **MIAMI FL 33129**

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 authorized 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 to this report.

SIGNATURE:

**SIGNATURE REQUIRED**

**9-11-99**

Date

Daytime Phone #

CR2E034 (5/99)

0054919