2001 UNIFORM BUSINESS REPORT (UBR)				
DOCUMENT # P980000 39350 1. Entity Name			SECRETARY OF STAIL	
SAS EATERY, INC.			OI OCT 26 AMII: 05	
Principal Place of Business	Mailing Address		7111:06	
1757 N.E. Inlave.	N	EW		
MAMI, FL. 33/32	. \			
2. Principal Place of Business 3. Mailing Address 1717 MBAYS		SHORE DR.		
Suite, Apt. #, etc. Suite, Apt. #, etc. 4 Apt. # 3		373Z	DO NOT WRITE IN THIS SP.	ACE
City & State	City & State 4/4MI, F		4. FEI Number 66-0832/82	Applied For Not Applicable
Zip Country	Zip 33, 32	Country Vr.SA	5 Cortificate of Status Desired S	8.75 Additional
6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Ag	
KLEIN MAYMOND A. DATE OF INC - 4-30-98				
1717 N. BAY SHORE DRIVE Street Address (P.O. Box Number is Not Acceptable)				
MIAMI, FL. 33/32				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 Kayon a. Flein President Raymand A. KIFIN 10-24-2001 Signature, VDEd 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 Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FE After September 12, 200 Make Check Payable to				\$5.00 May Be Added to Fees
11. OFFICERS AND D		12.	ADDITIONS/CHANGES TO OFFICERS AND D	
ME RAYMOND A. KLEIN REET ADDRESS 17/7 N.BAY SHORE DRIVE TY-ST-ZIP NIAM, FL, 33/32 # 3732		TITLE NAME STREET ADDRESS CITY-ST-ZIP	90004677639-0 -11/14/01-01001-023 ****150.00 ****150.00	
MARIA A. VILA DEIGIE STREET ADDRESS 1375 MARSELLE DR.		TITLE NAME STREET ADDRESS		Change Addition 5
CITY-ST-ZIP MIAMI BEACH,	_	CITY-ST-ZIP		7.05
TITLE NAME	☐ Delete	TITLE NAME	L	Change Addition
STREET ADDRESS CHY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP		
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CITY-ST-ZIP		CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delste	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. [Change Addition
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 changed, or on an attachment with an address, with all other like empowered.				

RAYMOND A KLEIN 1717 N. BAYSHORE DRIVE APT 3732 MIAMI, FL 33132

Request taken by: cmcintyre 10-16-2001

The forms you recently requested from this office are:

(1) 201. COR Profit A/R

Should you have any questions or need any further information, please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

TINFVER RECEIVED AN APPLICATION TO FILE THE 2001 CORPORATION ANNUAL REPORT, PLEASE ACCEPT MY CHECK FOR \$150,00 AND REINSTATE OUR CORPORATION,

Royand Klein President S&SEATERY INC,