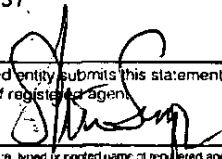


FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90419 029 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

94063822

DOCUMENT # P99000074065			
1. Entity Name SAGER DEVELOPMENT CORP.			
Principal Place of Business 48 E FLAGLER STREET PH-104 MIAMI, FL 33131 US		Mailing Address 48 E FLAGLER STREET PH-104 MIAMI, FL 33131 US	
DO NOT WRITE IN THIS SPACE		04162004 No Chg-P CR2E034 (10/03)	
		4. FEI Number 65-0945742 <table border="1"> <tr> <td>Applied For</td> </tr> <tr> <td>Not Applicable</td> </tr> </table>	
Applied For			
Not Applicable			
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MOSKOVITZ, DANIEL ESQ. 48 EAST FLAGLER STREET PENTHOUSE 104 MIAMI, FL 33131		DO NOT WRITE IN THIS SPACE	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE:  (NOTE: Registered Agent signature required when renewing) DATE: _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE	D		
NAME	SAGER, STEVEN		
STREET ADDRESS	508 E BOYNTON BEACH BLVD		
CITY - ST - ZIP	BOYNTON BEACH, FL 33435		
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  - PRESIDENT		4-20-04 561-722-2000	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	