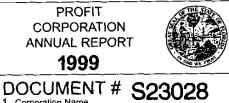
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

S A SUPPORT CORP.

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90002 012 ***150.00



Principal Place	of Business	Mailing Address				I (Market of the state of the s	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4.677
3191 CORAL W	AY	3191 CORAL WAY				(
SUITE 405		405				DO NOT WRITE IN THIS SPACE			
MIAMI FL 33145	MIAMI FL 33145 US	145			3. Date incorporated or Qualifed 01/04/1991				
US	vo								
		3- Marillan Address				4. FEI Number		Annie	ed For
—₁ '	ace of Business	2a. Mailing Address				65-0257368	· -	 :	pplicable
21		Suite Act # ata	Suite, Apt. #, etc.			00-020/300	\$87	75 Add	
Suite, Apt. i	#, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired		e Requ	
22		City & State				6. Election Campaign Financing	\$5	.00 Ma	
City & State						Trust Fund Contribution		ded to F	, ,
23	Country	Zip	Coun	ntrv				-	
Zip 		<u></u>	30			8. This corporation owes the current year Intangible Personal Property Tax. See No. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
24	9. Name and Address of Current		0			10. Name and Address of New Registered			
	9. Name and Address of Current	Registered Agent	+	81	Name	To: Touris dia 1704. 400 0. 1100			
MALE	SER, JAMES A.		Ĺ						
	CORAL WAY		82 Street Ad			ress (P.O. Box Number is Not Acceptable)			
SUITE 405			83						
	AI FL 33145			03		•	_		
MAN	/II FL 33143		ļ	84	City		85	Zip Co	ie
				L		poration submits this statement for the purpose of		- 4	-:
office or re agent. I ar	egistered agent, or both, in the State on m familiar with, and accept the obligat	of Florida. Such change was aut	horized	DY th	ne corporation	on's board of directors. I hereby accept the appo	intment a	as regis	tereu
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: R	egistered A	Agent s	signature require	ed when reinstating) DATE			
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS A			
TITLE	D	☐ DELETE	1.1 777	LΕ	- }		☐ Cha	inge	Addition
NAME	HAUSER, JAMES A.		1.2 NA	ME					
STREET ADDRESS	3191 CORAL WAY #405		1.3 STF	REET A	DDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CIT	Y-ST-Z	ZIP				
TITLE	P DELETE		2.1 TITLE				Cha	inge	Addition
NAME	GOUDA, NASSER		2.2 NA	ME	ĺ				
ţ	3191 CORAL WAY #405		2.3 STE	REFTA	ODRESS				
STREET ADDRESS	MIAMI FL		2, 4 CIT			•		_	
CITY-ST-ZIP	VP DELETE		3,1 TITI				Cha	inge	Addition
TITLE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ال المالية	3.2 NA						
NAME	HAUSER, JAMES A		I.		NODRESS				
STREET ADDRESS	3191 CORAL WAY #405				- 1				
CITY-ST-ZIP	MIAMI FL	☐ DELETE	3.4. CIT		-214		Cha	ange	Addition
TITLE		∐ UELE IE	4.1 TIT		(90	
NAME			4. 2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		D per eve	4.4 CIT		ZIP			nne	Addition
TITLE		☐ DELETE	5.1 TTT		}	•	☐ Cha	any c	- AGUIDON
NAME			5.2 NA			•			
STREET ADDRESS					ADDRESS		-		
CITY-ST-ZIP			5.4 CIT		ZIP				- مندندنده 🗔
TITLE		☐ DELETE	6.1 TIT		{		☐ Cha	ange	Addition
NAME			62 NA	ME	-				
STREET ADDRESS			6.3 ST	REET A	ADDRESS	÷			
CITY, ST. ZID			6.4 CIT						
	certify that the information supplied wi	th this filing does not qualify for	he exer	nptio	n stated in	Section 119.07(3)(i), Florida Statutes. I further c	artify that	the infe	ormation
indicated officer or Block 12	on this annual report or supplemental director of the corporation or the rege or Block 13 if changed, or on an artist	I annual report is true and accura- iver or trustee empowered to ex- tarpent with an address, with all	ate and ecute th other like	that i is rej e em	my signatur port as requ powered.	Section 119.07(3)(), Fibrida Statutes, I turing re shall have the same legal effect as if made un sired by Chapter 607, Florida Statutes, and that	uer batn; my name	inatia appea	rsin