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Mar 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S25583** (3)
1. Corporation Name
SAS INTERNATIONAL KI SCIENCE ASSOCIATION, INC.

Principal Place of Business
**801 SOUTH BAYSHORE DRIVE
PENTHOUSE 2067
MIAMI FL 33131**

Mailing Address
**801 SOUTH BAYSHORE DRIVE
PENTHOUSE 2067
MIAMI FL 33131-2941**



2. Principal Place of Business 21 11767 S. DIXIE HWY Suite, Apt. #, etc. 22 MIAMI, FLORIDA City & State 23 33156 Zip 24 DADE Country		2a. Mailing Address 26 11767 S. Dixie Hwy. Suite, Apt. #, etc. 27 MIAMI, FLORIDA City & State 28 33156 Zip 29 DADE Country		3. Date Incorporated or Qualified 01/17/1991		3a. Date of Last Report 03/22/1996	
				4. FEI Number 65-0240202		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 has liability for intangible tax under s. 199.03? Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent FUKUDA, ROBERT J. 801 SOUTH BAYSHORE DRIVE SUITE 2067 MIAMI FL 33131				10. Name and Address of New Registered Agent 81 Name FUKUDA, ROBERT J. 82 Street Address (P.O. Box Number is Not Acceptable) 11767 S. DIXIE HWY. 83 #114 84 City MIAMI 85 Zip Code FL 33156			

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, its 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 _____ (NOTE: Registered Agent signature required when re-appointing) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11.1 TITLE DT	☐ DELETE	11.1 TITLE DT	☐ Change ☐ Addition
11.2 NAME NAKAGAWA, RIKIKO		11.2 NAME NAKAGAWA, RIKIKO	
11.3 STREET ADDRESS 801 S. BAYSHORE DR., 2067		11.3 STREET ADDRESS 801 S. BAYSHORE DR., 2067	
11.4 CITY- ST- ZIP MIAMI FL		11.4 CITY- ST- ZIP MIAMI FL	
11.5 TITLE DPS	☐ DELETE	11.5 TITLE DPS	☐ Change ☐ Addition
11.6 NAME FUKUDA, ROBERT J		11.6 NAME FUKUDA, ROBERT J	
11.7 STREET ADDRESS 801 S. BAYSHORE DR., 2070		11.7 STREET ADDRESS 801 S. BAYSHORE DR., 2070	
11.8 CITY- ST- ZIP MIAMI FL		11.8 CITY- ST- ZIP MIAMI FL	
11.9 TITLE DV	☐ DELETE	11.9 TITLE DV	☐ Change ☐ Addition
11.10 NAME FUKUDA, YUKAKO N		11.10 NAME FUKUDA, YUKAKO N	
11.11 STREET ADDRESS 801 S. BAYSHORE DR., 2070		11.11 STREET ADDRESS 801 S. BAYSHORE DR., 2070	
11.12 CITY- ST- ZIP MIAMI FL		11.12 CITY- ST- ZIP MIAMI FL	
11.13 TITLE DT	☐ DELETE	11.13 TITLE DT	☐ Change ☐ Addition
11.14 NAME NAKAGAWA, RIKIKO		11.14 NAME NAKAGAWA, RIKIKO	
11.15 STREET ADDRESS 801 S. BAYSHORE DR., 2067		11.15 STREET ADDRESS 801 S. BAYSHORE DR., 2067	
11.16 CITY- ST- ZIP MIAMI FL		11.16 CITY- ST- ZIP MIAMI FL	

14. I do 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 included 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 empowered 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 with an address.

SIGNATURE: 3/11/97 (305) 668-4860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)