

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000007396

**FILED**  
**Jan 09, 2014**  
**Secretary of State**  
**CC1998905242**

**Entity Name:** SAH ENTERPRISES SOUTHEAST, INC.

**Current Principal Place of Business:**

205 HILL ST  
SANTA MONICA, CA 90405

**Current Mailing Address:**

P.O. BOX 4049  
SANTA MONICA, CA 90411

**FEI Number:** 95-2418930

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name COSBY, WILLIAM HJR.  
Address P.O. BOX 4049  
City-State-Zip: SANTA MONICA CA 90411

Title VCFO  
Name COSBY, CAMILLE O  
Address P.O. BOX 4049  
City-State-Zip: SANTA MONICA CA 90411

Title ASD  
Name COSBY, SAMUEL R  
Address P.O. BOX 4049  
City-State-Zip: SANTA MONICA CA 90411

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAMILLE O. COSBY

**VICE PRESIDENT**

**01/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date