

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 MAY -1 AM 4:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | | |
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| CORPORATION ANNUAL REPORT 1995 |  | FLORIDA DEPARTMENT OF STATE Tallahassee, Florida Department of State Tallahassee, Florida 32399-0001 |
|--------------------------------------|---|---|

DOCUMENT # P41080 (3)

1. Corporation Name:
SAGE AMERICAN, INC.

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| Principal Place of Business 1621 18TH STREET, SUITE 110 DENVER CO 80202 | Principal Office 1621 18TH STREET, SUITE 110 DENVER CO 80202 |
|---|--|

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|--|---|
| 2. Principal Place of Business 21 1512 LARIMER | 26. Mailing Address 26 1512 LARIMER |
| State Apt # etc. 22 # 800 | State Apt # etc. 27 # 800 |
| City & State 23 DENVER CO | City & State 28 DENVER CO |
| 24 80202 25 USA | 29 80202 30 USA |

(EXCEPT WRITE IN THIS SPACE)

| | |
|---|---------------------------------------|
| 3. State Incorporated In (Quoted) | 3a. Date of Last Report |
| 10/21/1992 | 04/20/1994 |
| 4. FEI Number 84-1210175 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. Does corporation have liability for adaptation tax under 1993 Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent


| | |
|---|-------------|
| 81 Name | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) | FL |
| 83 | |
| 84 City | |

11. Pursuant to the provisions of law for corporations, Florida Statutes, the above signed, corporate officers, the undersigned, hereby accept the appointment as registered agent for the corporation of the above named, corporate officers, for the purpose of changing its registered agent as required under law, in the State of Florida. This 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 responsibility of the agent as defined in the statute.

SIGNATURE _____

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| 12. OFFICERS | 13. ADVERTISING OFFICERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr> <td>NAME</td> <td>PCD ISENBERG, WALTER 3031 E. 8TH AVE. DENVER CO</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> <tr> <td>NAME</td> <td>VD NEUMEYER, ZACHARY 635 HUDSON STREET DENVER CO</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> <tr> <td>NAME</td> <td>STD MIKOL, STEPHEN 2282 S. COOK STREET DENVER CO</td> <td> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add SECRETARY / TREASURER JAMES D. ROSENBERG 1512 LARIMER # 800 DENVER CO 80202 </td> </tr> <tr> <td>NAME</td> <td>SD HUCKABY, HOLLY 1621 18TH STREET, #110 DENVER CO</td> <td> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add SECRETARY AS CAROL A. GREEN 1512 LARIMER #800 DENVER, CO 80202 </td> </tr> </table> | NAME | PCD ISENBERG, WALTER 3031 E. 8TH AVE. DENVER CO | <input type="checkbox"/> Change <input type="checkbox"/> Add | NAME | VD NEUMEYER, ZACHARY 635 HUDSON STREET DENVER CO | <input type="checkbox"/> Change <input type="checkbox"/> Add | NAME | STD MIKOL, STEPHEN 2282 S. COOK STREET DENVER CO | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add SECRETARY / TREASURER JAMES D. ROSENBERG 1512 LARIMER # 800 DENVER CO 80202 | NAME | SD HUCKABY, HOLLY 1621 18TH STREET, #110 DENVER CO | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add SECRETARY AS CAROL A. GREEN 1512 LARIMER #800 DENVER, CO 80202 | <table border="1"> <tr> <td>NAME</td> <td></td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> <tr> <td>NAME</td> <td></td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> <tr> <td>NAME</td> <td></td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> <tr> <td>NAME</td> <td></td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> <tr> <td>NAME</td> <td></td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> <tr> <td>NAME</td> <td></td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Add </td> </tr> </table> | NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Add | NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Add | NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Add | NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Add | NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Add | NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Add |
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14. I do hereby certify that the information supplied with this filing is true and correct, and that I am qualified to be the registered agent for the corporation in the State of Florida. I further certify that the information supplied with this filing is true and correct, and that I am qualified to be the registered agent for the corporation in the State of Florida. I further certify that the information supplied with this filing is true and correct, and that I am qualified to be the registered agent for the corporation in the State of Florida. I further certify that the information supplied with this filing is true and correct, and that I am qualified to be the registered agent for the corporation in the State of Florida.

SIGNATURE:  **CAROL A. GREEN** 4-26-95 (302) 595-9200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR