

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

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAY 23 PM 1:19

DOCUMENT # **V69301** (2)

1. Corporation Name  
**THE SAVOY GROUP, INC.**

Principal Place of Business  
**1100 N.E. 7TH AVENUE  
SUITE A  
DANIA FL 33004**

Mailing Address  
**1100 N.E. 7TH AVENUE  
SUITE A  
DANIA FL 33004**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **10/01/1992**  
3a. Date of Last Report: **05/01/1994**  
4. FEI Number: **65-0417494**  
Applied For:  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. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country

2a. Mailing Address  
26. Suite, Apt. #, etc.  
27. City & State  
28. Zip  
29. Country

9. Name and Address of Current Registered Agent  
**HOUSTON, BART A.  
100 N.E. 3RD AVENUE  
SUITE 850  
FORT LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent  
B1. Name  
B2. Street Address (P.O. Box Number is Not Acceptable)  
B3.  
B4. City  
B5. Zip Code: **FL**

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 or 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 registering) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE: **D**  
NAME: **SHIELDS, LEBRON**  
STREET ADDRESS: **1100 NE 7TH AVE #A**  
CITY - ST - ZIP: **DANIA FL 33004**

TITLE: **PD**  
NAME: **HOUSTON, J. EDWARD**  
STREET ADDRESS: **1100 NE 7TH AVE #A**  
CITY - ST - ZIP: **DANIA FL 33004**

TITLE: **ST**  
NAME: **JIMENEZ, VINCENT W.**  
STREET ADDRESS: **1100 NE 7TH AVENUE, SUITE A**  
CITY - ST - ZIP: **DANIA FL**

TITLE: **D**  
NAME: **RIGGS, GIUSEPPE**  
STREET ADDRESS: **1100 NE 7TH AVENUE, SUITE A**  
CITY - ST - ZIP: **DANIA FL**

TITLE: \_\_\_\_\_  
NAME: \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_  
CITY - ST - ZIP: \_\_\_\_\_

TITLE: \_\_\_\_\_  
NAME: \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_  
CITY - ST - ZIP: \_\_\_\_\_

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: \_\_\_\_\_  Change  Addition  
1.2 NAME: \_\_\_\_\_  
1.3 STREET ADDRESS: \_\_\_\_\_  
1.4 CITY - ST - ZIP: \_\_\_\_\_

2.1 TITLE: \_\_\_\_\_  Change  Addition  
2.2 NAME: \_\_\_\_\_  
2.3 STREET ADDRESS: \_\_\_\_\_  
2.4 CITY - ST - ZIP: \_\_\_\_\_

3.1 TITLE: **V/S/T**  Change  Addition  
3.2 NAME: \_\_\_\_\_  
3.3 STREET ADDRESS: \_\_\_\_\_  
3.4 CITY - ST - ZIP: \_\_\_\_\_

4.1 TITLE: **D**  Change  Addition  
4.2 NAME: **PHIPPS, ZADA B.**  
4.3 STREET ADDRESS: **1100 N.E. 7th Avenue, Ste. A**  
4.4 CITY - ST - ZIP: **Dania, FL 33004**

5.1 TITLE: \_\_\_\_\_  Change  Addition  
5.2 NAME: \_\_\_\_\_  
5.3 STREET ADDRESS: \_\_\_\_\_  
5.4 CITY - ST - ZIP: \_\_\_\_\_

6.1 TITLE: \_\_\_\_\_  Change  Addition  
6.2 NAME: \_\_\_\_\_  
6.3 STREET ADDRESS: \_\_\_\_\_  
6.4 CITY - ST - ZIP: \_\_\_\_\_

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated 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: *Vincent W. Jimenez* **Vincent W. Jimenez, V.P.** 5/10/95 (305) 920-2581  
DATE: \_\_\_\_\_