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: CLIFFORD M. STEIN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

06/13/2019

POMPANO BEACH, FL 33073

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Mailing Address:

DOCUMENT# K86865

C/O CLIFFORD M. STEIN 2301 W. SAMPLE RD

C/O CLIFFORD M. STEIN 5345 PINE TREE DR MIAMI BEACH, FL 33140

FEI Number: 59-2948789

Name and Address of Current Registered Agent:

Entity Name: SAVITAR PROPERTIES, INC.

Current Principal Place of Business:

STEIN, CLIFFORD M 5345 PINE TREE DR MIAMI BEACH, FL 33140 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

Officer/Director Detail :

Title	Ρ	Title	VP
Name	STEIN, CLIFFORD M	Name	ECHARTE, MIGUEL
Address	5345 PINE TREE DR	Address	5345 PINE TREE DRIVE
City-State-Zip:	MIAMI BEACH FL	City-State-Zip:	MIAMI BEACH FL 33140

FILED Jun 13, 2019 Secretary of State 1252989073CC

Certificate of Status Desired: No

Date

Date