


2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2007 OCT 23 PM 2:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 559881	
1. Entity Name SAVA ENTERPRISES, INC.	

Principal Place of Business 2424 N.E. 9TH ST. #207 FORT LAUDERDALE, FL 33304	Mailing Address 2424 N.E. 9TH ST. #207 FORT LAUDERDALE, FL 33304
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2. Principal Place of Business - No P.O. Box # 120 E. OAKLAND PK. Blvd.	3. Mailing Address 120 E. OAKLAND PK. Blvd.
Suite, Apt. #, etc. 105-308	Suite, Apt. #, etc. 105-308
City & State FT. Lauderdale, FLA	City & State FT. Lauderdale, FLA
Zip 33334	Country USA



10172007 REIN-P CR2E098 (1/07)

4. FEI Number 59-1799037	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent VALLILLO, JOSEPH 2424 N.E. 9TH STREET, #207 FORT LAUDERDALE, FL 33304	7. Name and Address of New Registered Agent Name JOSEPH VALLILLO Street Address (P.O. Box Number is Not Acceptable) 120 E. OAKLAND PK. Blvd. STE. 105-308 City FT. Lauderdale, FL Zip Code 33334
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Joseph Vallillo DATE 10/17/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALLILLO, JOSEPH 2424 N.E. 9TH ST., #207 FT. LAUDERDALE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VALLILLO, JOSEPH 120 E. OAKLAND PK. Blvd. STE. 105-308 FT. Lauderdale, FLA. 33334 <input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph Vallillo DATE 10/17/07 954-5643642

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/24/07