## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 578189

(3)

SAVE WAY ENTERPRISES, INC.

I am an officer or director of the corp appears in Block 12 or Block 13 if c

**FILED** 

May 19 1997 8:00am

Secretary of State

Principal Place	ñ	Mailing Address																		
139 DUKE DRIVE				139 DUKE DRIVE																
LAKE WORTH FL \$3460			L	LAKE WORTH FL 33460-6319																
												100rpora		Qualifi	ed		ate of L 22/19		eport	
2. Principal Place of Business				2a. Mailing Address							4. FEI Number					1	Apı	plied For	٦	
21			26	26						59-1844605						Not	Applicab	e		
Suite, Apt. #, etc.				Suite, Apt. #. etc.						5. Certificate of Status Desired					Г	7	\$8.	<b>7</b> 5 A	dditional	
22			27	27						5. Continente di Stellas De						_J	F	ee Re	quired	
City & State				City & State						6. Election Campaign Financing					g _	_	\$5	.00	May Be	
23			28	28								Trust Fund Contribution					Added to Fees			
Zip	Country			├──ŋ ' ├──ŋ					Country			8. This corporation has liability for intangible to								
24		25	29	ا مادندند		13	10					Statutes		. 6 61		WAR PROPERTY.	No	·		
		and Address of Current	нед	istered A	gent		8	4T K	ame	10.	Name	and Ad	aress	of Nev	Regis	tered	Agent			$\dashv$
	AIS, PETE						6	'  <sup> </sup>	ame											
	DUKE DRI						82	2 S	trect Add	iress (P	O. Box	Numbe	r is No	1 Acce	ptable)					٦
LAKI	E WORTH	FL 33460						<u>.</u>												
							83	3												
							84	4 C	ity								85	Zip C	ode	
								1								FL	.	-		
11. Pursuant t	to the provis	ions of Sections 607.0502 jont, or both, in the State o	and	607,1508	l, Flori	da Statutes	the abo	ve-na	amed cor	poration	n submi	ts this s	tateme	nt for t	he purp	ose o	f chang	ing its	registere	Ĭ
agent. I a	m f <b>a</b> miliar w	th, and accept the obligat	ons	of, Soction	n 607.	.0505, Flori	da Statute	es.	COIPOIC	anon s D	oard or	Ciriocioi	15. 1110	ieoy a	ccept i	i ici aşıı	JOHNHE	iii as i	egistered	
SIGNATURE																				
· · · · · · · · · · · · · · · · · · ·	Signature, lyped	or printed name of registereo agost			olo	(NOTE:	Registered A	gent si	gnature <b>req</b> i							DATE				⅃
12.	BB	OFFICERS AND	DIRE	CIORS			13.			ΑΑ	ADDITIC	NS/CH/	ANGES	OOF	FFICEF	S ANI				4
TITLE	PD	n=+cn			☐ Di	LETE	1.1 TITLE										☐ Ch	ange	∐ Add₁tic	n
NAME	PANAIS,						1.2 NAME													
STREET ADDRESS	139 DUK						1.3 STREE	E1 ADE	RESS											
CITY-ST-ZIP		ORTH FL 33460					14 CITY	S1 - ZI	Р											╝
TITLE	VPD					ELETE	2 1 10 LE										Ch	ange	Additio	n
NAME		LOPOULOS, ANTREA					2 2 NAME		1											
STREET ADDRESS	151 DUK						2 8 STREE	ET ADD	RESS											
CITY-ST-ZIP		ORTH FL 33460					2 4 CITY	- S1 - 7	IP.											
TITLE	STD				∐ DI	ELETE	3.1 THEE		ĺ								L Ch	ange	Additio	n
NAME		GEORGE					3.2 NAME													
STREET ADDRESS		ma street					33 STREE	ET ADD	RESS											
CITY-ST-ZIP	WEST PA	ILM BEACH FL 33405					3.4. C/TY	- S1 - Z	P											
TITLE					☐ DI	LETE	4.1 TITLE	-				-					☐ Ch	ange	Addition Addition	n
NAME							4. 2 NAM	E												
STREET ADDRESS							4.8 STREE	ET ADD	ress											
CITY-ST-ZIP			·				4.4 CITY-	ST - ZI	P											
THILE					☐ D	LETE	5.1 TITLE								-		Ch.	ange	Additio	n ]
NAME							5.2 NAME	-												
STREET ADDRESS							5 8 STREE	ET ADD	RESS											
CITY-ST-ZIP							5.4 CITY-	\$1 - ZI	Р											
TITLE					D	LETE	61 TITLE										☐ Ch	ange	Additio	n
NAME							6.2 NAME	:												
STREET ADDRESS							6.3 STREE	ET ADD	RESS											
CITY-ST-ZIP					Λ	^	6.4 CITY-	S1 - ZI	P											
14. I do hereb	y certify the	t the information supplied	with	this filing	dues	ot qualify	for the ex	emp	tion state	d in Sc	ction 11	9.07(3)(	(i), Flor	ida Sta	tulos. I	furthe	r certify	that t	he	
Intermation	n indicated i	on this annual report of su ctor of the compration or t	je te jolde	mightal ar	yuste Yuste	eporus <b>n</b> empywe	e and acc red to xe	curat cute	e and tha this repo	at my sig ort as re	gnature equired	snail ha by Chap	ive the oter 60	samo 7, Flori	iega⊩e da Stat	rrect a utes; a	s II mac ind that	te und . my na	he ler oath; th amo	al