Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90028 046 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F87495 1. Corporation Name

SAVETA	( ACCOUNTING, INC.						
Principal Place	of Business	Mailing Address				11 Mili Millin Alftet bilber delfte on	))) U())()
3601 W COMMERCIAL BLVD #5 3601 W COMMERCIAL			D				
FT. LAUDERDALE FL 33309 US		#5 FT. LAUDERDALE FL 33309 US			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
		- T-2 - 12 - 12 - 12 - 12 - 12 - 12 - 12			06/09/1982 4. FEI Number		liad For
2. Principal Place of Business 2a. Mailing Address			4 .	5			Applicable
21 3601 W COMMERCIAL BUD 26 3601 W COMME Suite Apt. #, etc.			reine be	ענט	59-2316721	\$8.75 A	
Suite, Apt. 22 12. 38		27 StE 28			5. Certifcate of Status Desired	Fee Req	quired
City & State		City & State			6. Election Campaign Financing	\$5.00 N	
<u></u>	AUDERDALE FL	Zip Country			Trust Fund Contribution		1665
Zip 24 3330	Country <b>25</b> U.S	—————————————————————————————————————	30 US		This corporation owes the curre     Personal Property Tax.		□No I
24 3330	9. Name and Address of Current		30 4 -		10. Name and Address of New Ro		
	5. Name and Address of Carterio						
AKERS, CAROL 3601 W COMMERCIAL BLVD			<b>82</b> Str	eet Addre	ss (P.O. Box Number is Not Acceptat	ole)	
STE 5			83		0.0		
FT. LAUDERDALE FL 33309				572	28		
				у	;	FL 85 Zip C	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida, Such change was at ions of, Section 607.0505, Flori	utnorized by the c rida Statutes.	corporation	is board of directors. Thereby accept	1-7-99	istered
	Signature, typed or printed name of registered agent		Registered Agent signs	ture required		DATE	20 11 40
12.	OFFICERS AND	D DIRECTORS	13.	5.	ADDITIONS/CHANGES TO OFF	FICERS AND DIRECTOR	Addition
TITLE	AKERS, CAROL		1.2 NAME	13.	D •		
NAME	3601 W COMMERCIAL BLVD #		13 STREET ADDRESS 3601 W. Commercial Blue #28			İ	
STREET ADDRESS	FT. LAUDERDALE FL 33309			ESS 700 C	W. Commercial Blue	1420	
CITY-ST-ZIP	AP V	☐ DELETE	1.4 CITY-ST-ZIP		/	[ Change	Addition
	NICOTRA, CAROL		2.2 NAME				
NAME	3601 W COMMERCIAL BLVD #	× 28		ESS 366	OI W. COMMER		
STREET ADDRESS	FT. LAUDERDALE FL 33309	2.4 CITY-ST-ZIP	عيد ا				
CITY-ST-ZIP TITLE	<b>~</b> ^	☐ DELETE	24 707 5	P		☐ Change	Addition
NAME	C.B. AKERS 3601 W Commer		3.2 NAME	C.1	B. AKERS		
STREET ADDRESS	ZIDI W Commer	CIAI BIVE #28	3.3 STREET ADD	ESS 340	O W. COMMERCIAL BL	UD STE 28	
CITY-ST-ZIP	FF LAUDER LA	IE. Fl 33309	3.4. CITY-ST-ZIP	FT	LAUDERDALE, FL 3	3309	
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4 3 STREET ADDR	ESS		•	
CITY-ST-ZIP		<u> </u>	4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			52 NAME				<i>'</i>
STREET ADDRESS			5.3 STREET ADDR	ESS	_		
CITY-ST-ZIP			54 CITY-ST-ZIP		-	Chance	□ Addition
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME	-500	. '		
STREET ADDRESS			6.3 STREET ADDR	ESS			i

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:**