2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F98000004806

1. Entity Name
SAVAGE SERVICES CORPORATION



Principal Place of Business

6340 S. 3000 EAST

#600

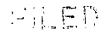
SALT LAKÉ CITY, UT 84121

Mailing Address

6340 S. 3000 EAST

#600

SALT LAKE CITY, UT 84121



07 JUH 18 AN 7:07

SECRETAR LOT STATE TALLAHASSLE, FLORIDA



DO NOT WRITE IN THIS SPACE

05022007 No Chg-P

CR2E034 (11/05)

4. FEI Number 87-0237425 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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The above named entity submits this statement for the obligations of registered agent.	e purpose of changing its registered offi	ce or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and	title il applicable. (NOTE: Registered Agent	signature	required when reinstalling)	DATE
FILE NOW!!! FEE IS \$150.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

OFFICERS AND DIRECTORS 10. TITLE ALEXANDER, ALLEN B NAME STREET ADDRESS 6340 S. 300 E. #600 SALT LAKE CITY, UT 84121 CITY-ST-ZIP VAS TITLE LEWIS, H. BENSON NAME 6340 S. 3000 E. #600 STREET ADDRESS CITY-ST-ZIP SALT LAKE CITY, UT 84121 JENSEN, JAMES T NAME STREET ADDRESS 6340 S. 3000 E #600 CITY-ST-ZIP SALT LAKE CITY, UT 84121 TITLE DOWD, CURT NAME STREET ADDRESS 6340 S. OCEAN S. 3000 E. #600 CITY-ST-ZIP SALT LAKE CITY, UT 84121 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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300103824453 06/04/07--01002--009 **650.00

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 emowered 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 emowered.

SIGNATURE:

CITY-ST-ZIP

THE DIAME OF SIGNING OFFICER OR DIRECTOR

5/2/07

BOLGUH GON

801-944-6600