FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 23 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (0) SAVE MONEY REALTY INC. Mailing Address Principal Place Business 8876 CORAL WAY % DIANA MATAVEL 2680 SV/92 AVE 2680 SW 92 AVE DO NOT WRITE IN THIS SPACE FL 33165 MIANJ/FL 33165 3. Date incorporated or Qualified 10/06/1988 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 8300 ്യ 8 57 65-0078181 Not Applicable 26 Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 107-108 Fee Required 6. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution Added to Fees 28 8. This corporation owes or has paid the current year intangible いフケ Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name tavel: Diana M. 2680 **SW** 92 AVE Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33165** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent's greature required when reinstating) Signature, typod or ponted name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. VOS DELETE Change Addition 1.1 TITLE TITLE TAVEL, DIANA M. 1.2 NAME NAME 2680 SW 92 AVE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition VDS 2.1 TITLE TITLE TAVEL, ALBERTO F. 2.2 NAME NAME 2680 SW 92 AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(1Y - ST - Z(P DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

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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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

STREET ADDRESS