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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K37063

1. Corporation Name

SAVE MONEY REALTY INC.

						T OLOUI BIEN OSON HOOT	
Principal Place of Business Mailing Address							
8300 SW 8 ST		8300 SW 8 ST					
107-108 Miami FL 33144		107-108 Miami Fl. 33144			DO NOT WRITE IN THIS SPACE		
1000000 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -		US	re with		3. Date Incorporated or Qualifed		
**		•••			10/06/1988		
2. Principal P	ace of Business	2a. Mailing Addres			4. FEI Number	Applied For	
 '		}	26		65-0078181	Not Applicable	
Suite, Apt.	# etc	Suite, Apt. #, 6	etc.		\$8	.75 Additional	
22 - 27 - 27						ee Required	
			ly & State		6. Election Campaign Financing S	5.00 May Be	
23		28				dded to Fees	
Zip Country Zip			ip Country		8. This corporation owes the current year Intangible	,	
24	25 29 30		30	Personal Property Tax.			
24	9. Name and Address of Cu	· · · · · · · · · · · · · · · · · · ·			10. Name and Address of New Registered Agent		
				Name	•		
Tavel, Diana M.			-	82 Street Address (P.O. Box Number is Not Acceptable)			
2680	SW 92 AVE		82 Street Ad		address (P.O. Box Number is Not Acceptable)	,	
MAIM	AI FL 33165		1	33	· · · · · · · · · · · · · · · · · · ·		
ļ			Į.	34 City	FL 85	Zip Code	
11 Dursuant	to the provisions of Sections 607	0502 and 607 1508 Florida	Statutes the ab	ove-named c	personation submits this statement for the numose of change	ing its registered	
office or r	opiciared agent of both in the S	tate of Fiorida, Such chande	was aumonzed :	ov trie cordoi	ration's board of directors. I hereby accept the appointment	as registered =	
agent. I a	m familiar with, and accept the of	bligations of, Section 607.05	05, Florida Statut	es.			
SIGNATURE	Signature, typed or printed name of registerer	d access and title of englanding	(NOTE: Recistered A	gent signature (90	quired when reinstating) DATE	·····	
12.		S AND DIRECTORS	13.	<u></u>	ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS IN 12	
TITLE	VDS	□ DEL	ETE 1.1 TmL	E		nange	
NAME	TAVEL, DIANA M.		1.2 NAA	l l		1	
STREET ADDRESS	2680 SW 92 AVE		1	EET ADDRESS		{	
'	MIAMI FL			-ST-ZIP	•	1	
CITY-ST-ZIP	VDS	□ DEI				nange Addition	
TITLE			2.2 NAA				
NAME	TAVEL, ALBERTO F. 2680 SW 92 AVE		1	EET ADDRESS	•	ļ	
STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL	□ DEL		Y-ST-ZIP	V/D 0	nange Maddition	
TITLE			3.2 NAM		Williams, Diana	· /> />	
NAME				EET ADDRESS	10003 SW 79 Court	Ì	
STREET ADDRESS				Į.	Minai FL 33156	[
CITY-ST-ZIP		DEL		Y-ST-ZIP	7 16m1, FC 33/36	nange Addition	
TITLE			4.1 III.				
NAME				1		ļ	
STREET ADDRESS				EET ADDRESS		}	
CITY-ST-ZIP				/-ST-ZiP		nange Addition	
TITLE		L. DEI	.ETE 5.1 TITL 5.2 NAM		· ,		
NAME				3		İ	
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				/-ST-ZIP		nange	
TITLE		☐ DEI			. –	Mailde Thumann	
NAME			6.2 NAA		, 4	•	
STREET ADDRESS			6.3 STR	EET ADDRESS			

CITY-ST-2IP 14. 1 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 prevaid 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 expect 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, with an other like empowered.

6.4 CITY-ST-ZIP