## 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

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90043 007 \*\*\*150.00

## DOCUMENT # **L90683**

1. Corporation Name

SAVVY TRAVEL, INC.

Principal	Place	of Bu	usines

1266 106TH AVENUE NORHT

LARGO FL 33778

**SIGNATURE:** 

Mailing Address

12266 106TH AVENUE NORTH **LARGO FL 33778** 



JS	•	US		DO NOT WRITE IN THIS	SPACE		
	• •			3. Date Incorporated or Qualifed 07/26/1990			
2. Principal Pla	ace of Business	2a. Mailing Address	~ /	4. FEI Number	Applied For		
1 57	5. Beicher Rd.	26 511 5. Beck	CHER Rd	<b>59-3021802</b>	Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	provater, F/	- City & State	n,F/	-6Election Campaign Financing Trust Fund Contribution	-\$5.00 May Be		
Zip 337	764 [25] PINE/IAS	29 Zip 33764 3	Country PINE//AS	This corporation owes the current year Interpretation Personal Property Tax.	☐Yes <b>☐N</b> o		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
IONES PATRICIA G. SI Name DONALE E. JONES							
JONES, PATRICIA G.			82 Street Address (P.O. Box Number is Not Acceptable)				
1266 106TH AVENUE NORTH							
LARG	GO FL 33778		83		ļ		
			84 City	Lenzuaten FL	85 Zip Code 4		
11. Pursuant t	to the provisions of Sections 607.050.	2 and 607.1508, Florida Statutes	the above named c	ornoration submits this statement for the nurpose of	changing its registered		
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	torized by the coroor	ration's board of directors. I hereby accept the appoi	ntment as registered		
	$\Lambda I  I$	Total A Section Co. Coco, Florida		PRESIDENT	1/14/99		
SIGNATURE	Sheater, (Vied or porter name of registered ager	nt and title if applicable. (NOTE: Ro	ONES egistered Agent signature rec	· · · · - · · · · · · · · · · · · ·	<del>-/-//</del>		
12,		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12		
TILE	P	☐ DELETE	1.1 TITLE		Change		
NAME	JONES, PATRICIA G.		1.2 NAME	DIRECTOR	<b>'</b>		
STREET ADDRESS	12266 106TH		1.3 STREET ADDRESS		ļ		
CITY-ST-ZIP	LARGO FL 33778		1.4 CITY-ST-ZIP				
TITLE	DST	☐ DELETE	2.1 TITLE	PRESIDENT	Change		
NAME	JONES, DONALD E.		2.2 NAME	Sec /Tresut			
STREET ADDRESS 12266 106TH AVENUE NORTH		2.3 STREET ADDRESS	sec/Illesure				
	LARGO FL 33778		2. 4 CITY-ST-ZIP				
TITLE 2	Enlide 12 doire	DELETE .	3.1 TITLE -		Change Addition		
NAME	,		3.2 NAME				
	-		3.3 STREET ADDRESS				
STREET ADDRESS	. **						
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition		
			4.2 NAME		-		
NAME STREET ADDRESS			4.3 STREET ADDRESS				
STREET ADDRESS	•						
CTY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition		
TITLE		C) Setric	5.2 NAME				
NAME		•	5.3 STREET ADDRESS				
STREET ADDRESS			5.4 CITY-ST-ZIP				
CITY-ST-ZIP	<del></del>	[] DELETE	6.1 TILE		☐ Change ☐ Addition		
TITLE		ال المحددات	6.2 NAME				
NAME	,		6.3 STREET ADDRESS				
STREET ADORESS	-						
CITY-ST-ZIP		de this Ellin days is some if a	6.4 CITY-ST-ZIP	in Cartion 110 07/3///) Electe Ctatutes I further as	tifu that the information		
indicated officer or e Block 12 6	cerury that the information supplied with on this annual report or supplemental director of the corporation or the rede or Block 13 if changed, or on an attac	of this filling does not qualify for the fannual report is true and accurativer or trustee empowered to exchange with all of the fannishment with an address, with all of the fannishment with an address, with all of the fannishment with all of the fannish	te end that my signa cute this report as re ther like empowered	in Section 119.07(3)(i). Florida Statutes. I further cei ture shall have the same legal effect as if made und aquired by Chapter 607, Florida Statutes; and that m	er oath; that I am an		