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

PROFIT CORPORATION **ANNUAL REPORT**

1997

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # M21633

(6)

Aug 22 1997 8:00 am Secretary of State

FILED

SAVITT CONSULTING CORPORATION

* EDWARD	HARBOR DR UNIT 1B	8200 W BAY HARB	Mailing Address % EDWARD H. SAVITT 9200 W BAY HARBOR DR UNIT 1B MIAMI FL 33154-2758			
					3. Date incorporated or Qualified 10/07/1985	3a. Date of Last Report 08/09/1996
2. Principal	Place of Business	<u></u> ⊢-,	2a. Mailing Address		4. FEI Number 59-2583267	Applied For
Suite, Apt. #, etc.		26 Suite, Apt. #, 6	Suite, Apl. #, etc.			Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country				Trust Fund Contribution 8. This corporation has liability for it	
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of (Current Registered Agent		1	10. Name and Address of New Re	gistered Agent
	NTT, EDWARD H.	T 40	81	Name		
	00 w bay harbor dr Uni Ami Fl 33154	ו ום	82	Street Add	Address (P.O. Box Number is Not Acceptable)	
1714	Mail I E 00 104		83			
	, m		84	City		85 Zip Code
44 5		07.05.00		1		
agent. I	am familiar with, and accept the	07.0502 and 607.1508, Florida State of Florida. Such chang e obligations of, Section 607.0:	i Statutes, the abov e was authorized b 505, Florida Statute	e-named corp y the corporal s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered if the appointment as registered
SIGNATURE	Signature, typed or printed name of regist	teren agent and the if applicable	(NOTE: Hagistored Ag	ont signature requi	red when reinstating)	DATE
12.	, R.S		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DELETE SAVITT, EDWARD H.				Change Addition	
NAME STREET ADDRESS	DODGE WERE THE PARTY OF THE	R UNIT 18	1.2 NAME 1.3 STREET ADDRESS		9000022780192 -08/27/9701014012 ****165.00 *****165.00	
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NAME			3.2 NAME			
STREET ADDRESS	S			ADDRESS		
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NAME	Send District		4. 2 NAME			
STREET ADDRESS	s		4.3 STREET	ADDRESS		
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NAME			5.2 NAME			
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TITLE		☐ DELI	1			L Change Addition
NAME	Í		6.2 NAME			

14. I do 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 it an attachment with an address.



SAVITT CONSULTING CORPORATION c/o Edward H. Savitt

To: Dept. of State, St. of Florida PO Box 6327 Tallahassee, Fl. 32314

Date: August 12, 1997

Re: SAVITT CONSULTING CORP. FEI #59-2583267 1997 Corp. Annual Report Your "Document" number M21633

Dear Sir or Madam:

After speaking with a helpful staffer in your staff about my circumstances, I am forwarding the executed 1997 annual report. The undersigned has recently encountered significant extenuating circumstances which delayed this filing, and I humbly request your kind consideration in accepting the filing. Enclosed please find:

- 1. completed and executed 1997 annual filing, along with my personal remittance for \$165.00 made on behalf of this entity.
- 2. Note that I was in a serious automobile accident coincident with the original filing due date. I was out-of-State from early April. Following the accident on 4/26/97, I was enduring surgery, medical rehab and various insurance paperwork.

I have enclosed evidence of the accident from the Fla. Highway Patrol, as well as a letter from my Insurance company documenting the date of the accident, and that I was experiencing medical injuries. Further proof is available, if necessary.

3. Additional Hardship/Disability: I wish I could've contacted your office before the "2nd notice" arrived. As you may imagine, my life was quite dis-ordered for awhile, and I have no staff or secretary. Further, following the accident my medical advisors have declared me "disabled", and frankly, unable to do regular work. A letter from my Pulmonarist summarizing my disability is also enclosed. I am required to keep the corporation "active", for perhaps another year, to settle certain legal and administrative matters. The fee called for in the second notice would be a hardship beyond my affordability: I implore you to utilize any available administrative discretion to accept the fee enclosed in light of my unusual circumstances.

Thank you again for your assistance and understanding about this filing. Please write to me at the below address if there is any difficulty with this filing or anything else that requires attention.

Sincerely,

Edward H. Savitt President/Director