## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 31, 2001 8:00 am Secretary of State DOCUMENT # P0000020722 SAVIZAM SALES, INC. 01-31-2001 90022 046 \*\*\*150.00 Principal Place of Business Mailing Address 100 KINGS POINT DR., STE, 1708 100 KINGS POINT DR., STE, 1708 MIAMI BEACH FL 33160 MIAMI BEACH FL 33160 909155 2. Principal Place of Business 3. Mailing Address 4890 SHERIDAN 4890 SHERIDAN Suite Apt #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For FL TOLLYWOOD 65-001 Not Applicable PLLYWOOD Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 3*3*റ2 : 3302 l υSA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WARRA **GHERMAN, WARREN** Street Address (P.O. Box Number is Not Acceptable) 100 KINGS POINT DR., STE. 1708 MIAMI BEACH FL 33160 4890 $\zeta_{-}$ SHERIDAN Zip Code **330**2 HOLLYWOOD 8. The above name tentity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. DARREN GHERMAN SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE ☐ Delete Change-☐ Addition TITLE GHERMAN, MICHAEL NAME NAME STREET ADDRESS 100 KINGS POINT DR., STE. 1708 STREET ADDRESS 4890 SHERIDAN CITY-ST-ZIP CITY-ST-7IP MIAMI BEACH FL 33160 TITLE ☐ Delete TITLE Addition **GHERMAN, REES** NAME NAME STREET ADDRESS 100 KINGS POINT DR., STE. 1708 STREET ADDRESS SHERIDAN CITY-ST-ZIP MIAMI BEACH FL 33160 CITY-ST-ZIP STD TITLE ☐ Addition TITLE ☐ Delete NAME GHERMAN, PIA NAME 100 KINGS POINT DR., STE. 1708 STREET ADDRESS STREET ADDRESS SHERIDAD CITÝ-ST-ZIP MIAMI BEACH FL 33160 CITY-ST-ZIP HOLLYWOOD ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report of 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 requirement of the corporation or the requirement of the corporation or the requirement with an address, with all other like empowered.

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

DARREN GHERMAN

CITY-ST-ZIE

SIGNATURE:

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Delete

1/19/01

9**54**-791-1161

☐ Change

☐ Change

Addition

☐ Addition

Daytime Phone #

CHZEU34 (10/