## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

SIGNATURE:

## Apr 23, 2008 8:00 am Secretary of State **DOCUMENT # P00000020819** 1. Entity Name 04-23-2008 90039 043 \*\*\*150.00 SAVITS ENTERPRISES, INC. Principal Place of Business Mailing Address 1360 NE 103 STREET 1360 NE 103 STREET MIAMI SHORES, FL 33138 MIAMI SHORES, FL 33138 2. Principal Place of Business - No P.O. Box # 1400 NE 1035 Suite. Apt #, etc. Chg-P 04072008 CR2E034 (12/06) 4. FEI Number Applied For Miami Shors 65-0867495 Not Applicable Miami Da \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SAVITS, CHRISTOPHER L 1360 NE 103 STREETS MIAMI SHORES, FL 33138 ateme), for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am tamiliar with, and accept 8. The above named entity son the obligations of registe SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD PD THIE Delete TITLE **Change** Addition savits, Christopher L SAVITS, CHRISTOPHER L NAME NAME THEO NE 103ST 1360 NE 103 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI SHORES, FL 33138 CITY-ST-ZIP miami shores PL 33/38 TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 171.6 □ Defete frii j ☐ Change Addition NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-7F CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-ST-78 CITY ST-2IP ☐ Defete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or 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 receiver of trustee properties as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment

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