2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000081548 1. Entity Name SAVE - A - FRIEND, INC.					FILED 03 SEP 10 AM 10: 27	Ą
Principal Place of Business 7916 SADDLEBROOK DRIVE PORT SAINT LUCIE FL 34986 Mailing Address 7916 SADDLEBROOK DRIVE PORT SAINT LUCIE FL 34986 Mailing Address 7916 SADDLEBROOK DRIVE PORT SAINT LUCIE FL 34986			6		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
, .	VACKEMHUT DRIVE	3. Mailing Address 4200 WACKSMHU Suite, Apt. #, etc.	1 Dave		I IDDINOON IKI OBIIK DANN DANK BANN BOKN DANN 1419: NOBI SINI DISON LON	. []
10	0	100			CHECK HERE IF MAKING CHANGES	
City & State	Beach Gardeus FL	City & State Palm Beach Govo	leus Fi	<u>_</u> '	4. FEI Number 52-2268722 Applied Fo Not Applie	
Zip 334	HIO Country		Country USA.		5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current F				7. Name and Address of New Registered Agent	
LEVINE, MURRAY 7916 SADDLEBROOK DRIVE PORT SAINT LUCIE FL 34986 Name Robert Kilbvide Street Address (P.O. Box Number is Mot Acceptable) #200 Wockenhul Vive #100						
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Typ Code 334/10 Lam familiar with, and accept the obligations of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State 9. Election Campaign Financing Trust Fund Contribution.						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT LEVINE, BARBARA 7916 SADDLEBROOK DRIVE PORT SAINT LUCIE FL 34986	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	GAR 420	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Y SANDERS PD Change Add O WACKENHUT DRIVE SUITE 100 1 BEACH GARDENS, FL 33410	CR2E034 (4/03)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVINE, MURRAY 4200 WACKENHUT DRIVE PALM BEACH GARDENS FL 3341	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		600022928156 09/10/03-01042-007 **550.00	lition 8
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD LEVINE, DREW 8550 DALKEITH LANE MIAMI LAKES FL 33016	2 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Add	ition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Ado	ition
12. 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 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 or trustee employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachm.						