

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000045189

Entity Name: SAV ENTERPRISE, INC.

FILED
May 19, 2008
Secretary of State

Current Principal Place of Business:

1544 MARKET CIRCLE
#1104
PORT CHARLOTTE, FL 33953

Current Mailing Address:

1544 MARKET CIRCLE
1104
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

1129 TAMIAMI TR.
UNIT 6
PORT CHARLOTTE, FL 33953

New Mailing Address:

1129 TAMIAMI TR.
UNIT 6
PORT CHARLOTTE, FL 33953

FEI Number: 59-3720129

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIGLIOTTI, SALVATORE A PRES.
5393 KENNEL ST.
PORT CHARLOTTE, FL 33981 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V.P. () Delete
Name: VIGLIOTTI, JOANNE V.P.
Address: 5393 KENNEL ST
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: SEC. () Delete
Name: VIGLIOTTI, VANESSA C SEC.
Address: 12407 PARAMOUNT DR.
City-St-Zip: PUNTA GORDA, FL 33955

Title: PRES () Delete
Name: VIGLIOTTI, SALVATORE A PRES
Address: 5393 KENNEL ST
City-St-Zip: PORT CHARLOTTE, FL 33981

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVATORE A. VIGLIOTTI

PRES

05/19/2008

Electronic Signature of Signing Officer or Director

Date