

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000045189

Entity Name: SAV ENTERPRISE, INC.

**FILED**  
**Oct 30, 2008**  
**Secretary of State****Current Principal Place of Business:**1129 TAMIAMI TR.  
UNIT 6  
PORT CHARLOTTE, FL 33953**New Principal Place of Business:****Current Mailing Address:**1129 TAMIAMI TR.  
UNIT 6  
PORT CHARLOTTE, FL 33953**New Mailing Address:**

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:**VIGLIOTTI, SALVATORE A PRES.  
1129 TAMIAMI TR.  
UNIT 6  
PORT CHARLOTTE, FL 33953 US

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: S A VIGLIOTTI PRES.

10/30/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: V.P. ( ) Delete  
Name: VIGLIOTTI, JOANNE V.P.  
Address: 5393 KENNEL ST  
City-St-Zip: PORT CHARLOTTE, FL 33981Title: SEC. ( ) Delete  
Name: VIGLIOTTI, DENNIS S SEC.  
Address: 12407 PARAMOUNT DR.  
City-St-Zip: PORT CHARLOTTE, FL 33952Title: PRES (X) Delete  
Name: VIGLIOTTI, SALVATORE A PRES  
Address: 5393 KENNEL ST  
City-St-Zip: PORT CHARLOTTE, FL 33981**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: V.P. (X) Change ( ) Addition  
Name: VIGLIOTTI, JOANNE V.P.  
Address: 1129 TAMIAMI TR. UNIT 6  
City-St-Zip: PORT CHARLOTTE, FL 33953 USTitle: PRES (X) Change ( ) Addition  
Name: VIGLIOTTI, SALVATORE A PRES  
Address: 1129 TAMIAMI TR. UNIT 6  
City-St-Zip: PORT CHARLOTTE, FL 33953 USTitle: ( ) 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: S A VIGLIOTTI PRES

PRES

10/30/2008

Electronic Signature of Signing Officer or Director

Date