


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

6/ **FILED**  
**Jul 13, 2004 8:00 am**  
**Secretary of State**

06-14-2004 90007 043 \*\*\*150.00

DOCUMENT # P03000105270					
1. Entity Name TSAVO CORPORATION					
Principal Place of Business 5079 N. DIXIE HIGHWAY #104 OAKLAND PARK, FL 33334			Mailing Address 5079 N. DIXIE HIGHWAY #104 OAKLAND PARK, FL 33334		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HILL, DAVID 5079 N. DIXIE HIGHWAY #104 OAKLAND PARK, FL 33334				Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when re-issuing) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HILL, DAVID 5079 N. DIXIE HIGHWAY #104 OAKLAND PARK, FL 33334	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 empowered 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 attachment with an address with all other the empowered.					
SIGNATURE: _____			Date: <u>5/23/04</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone # _____		

66429867



04192004 Chg-P CR2E034 (10/03)

4. FEI Number 56-2397872 Applied For ☐ Not Applicable ☒

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required ☒

*Attachment*  
**ARTHUR PALERMO JR., CPA, P.A.**  
*Certified Public Accountant*  
5400 South University Drive  
Suite 119  
Davie, Florida 33328  
(954) 252-9622 • Fax (954) 252-5554

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July 9, 2004

Florida Department of Revenue  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

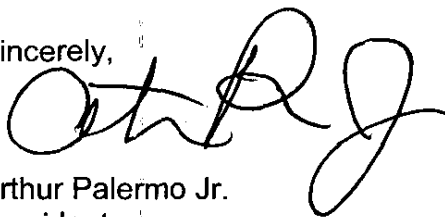
Date of Notice 06/16/04  
Ref. # P03000105270

Dear Annual Report Section:

My Client has received a notice for late filing of the uniform business report for 2004. Upon review of my clients' files we have no record of the post card sent to remind my client of his filing requirements. My client is a first time filer for the uniform business report and was not aware that this report was due on May 1. We discovered the problem when my client came to my office for some tax advice. I immediately went to Sunbiz.org web site and printed a URB report to file on behalf of my client. As a first time filer I respectfully request the penalty be waived and the URB status to be active. Thank you for your attention in this matter.

If you have any questions, please call my office.

Sincerely,



Arthur Palermo Jr.  
President

Enclosures (2):

FDR notice dated 6/16/04  
Copy of URB report Filed