

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117399

Entity Name: SAV-ON MORTGAGE, INC.

FILED  
Jan 21, 2006  
Secretary of State

## Current Principal Place of Business:

111 N. PINE ISLAND RD, STE 205-B  
C/O EVELINE FELCY DSOUZA  
PLANTATION, FL 33324

## Current Mailing Address:

111 N. PINE ISLAND RD, STE 205-B  
C/O EVELINE FELCY DSOUZA  
PLANTATION, FL 33324

## New Principal Place of Business:

111 N. PINE ISLAND RD, STE 205  
C/O EVELINE FELCY DSOUZA  
PLANTATION, FL 33324

## New Mailing Address:

111 N. PINE ISLAND RD, STE 205  
C/O EVELINE FELCY DSOUZA  
PLANTATION, FL 33324

FEI Number: 86-1085688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DSOUZA, ELIAS L ESQ  
111 N PINE ISLAND RD, STE 205-B  
DIVALE TOLENTINO AND DSOUZA, P.A.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

DSOUZA, ELIAS L ESQ  
111 N PINE ISLAND RD, STE 205  
ELIAS LEONARD DSOUZA, P.A.  
PLANTATION, FL 33324 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: ELIAS LEONARD DSOUZA

01/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DSOUZA, EVELINE F  
Address: 111 N PINE ISLAND RD, STE 205-B  
City-St-Zip: PLANTATION, FL 33324

Title: VD ( ) Delete  
Name: FERNANDES, REMEDIA  
Address: 111 N PINE ISLAND RD, STE 205-B  
City-St-Zip: PLANTATION, FL 33324

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: EVELINE F. DSOUZA

PD

01/21/2006

Electronic Signature of Signing Officer or Director

Date