2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026595

Entity Name: SAVI OF CENTRAL FLORIDA INC.

FILED May 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1706 W. CRAWFORD ST. 4027 BARWOOD DR. TAMPA, FL 33604 ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

1706 W. CRAWFORD ST. 4027 BARWOOD DR. TAMPA, FL 33604 ORLANDO, FL 32839

FEI Number: 41-2126343 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MURILLO, MARIO S MURILLO, MARIO S 4027 BARWOOD DR. 1706 W. CRAWFORD ST. TAMPA, FL 33604 US ORLANDO, FL 32839

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: MARIO S. MURILLO 05/20/2005

> 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 (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

MURILLO, MARIO S Name: Name: MURILLO, MARIO S 1706 W. CRAWFORD ST. 4027 BARWOOD DR. Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: ORLANDO, FL 32839

Title: DVP Title: DVP (X) Change () Addition () Delete Name:

TRONCOSO, PAULINO M Name: TRONCOSO, PAULINO M 1706 W. CRAWFORD ST. 4027 BARWOOD DR Address: Address: ORLANDO, FL 32839 City-St-Zip: TAMPA, FL 33604 City-St-Zip:

Title: Title: () Delete (X) Change () Addition

TRONCOSO, MARIO A Name: TRONCOSO, MARIO A Name: 1706 W. CRAWFORD ST. 4027 BARWOOD DR. Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: ORLANDO, FL 32839

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIO S. MURILLO **DPS** 05/20/2005