

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128081

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: SAVITS-DANIEL TRAVEL CENTERS, INC.

**Current Principal Place of Business:**

1360 NE 103RD ST.  
MIAMI SHORES, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

1360 NE 103RD ST.  
MIAMI SHORES, FL 33138

**New Mailing Address:**

FEI Number: 20-3647822      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAVITS, CHRIS  
4690 US HWY 27  
WESTON, FL 33332      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: SAVITS, CHRIS  
Address: 4690 U.S. HIGHWAY 27  
City-St-Zip: WESTON, FL 33332

Title: V ( ) Delete  
Name: DANIEL, JUAN  
Address: 4690 U.S. HIGHWAY 27  
City-St-Zip: WESTON, FL 33332

**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 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: CHRIS SAVITS

PD

04/16/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date