

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000139552

FILED
Feb 27, 2009
Secretary of State

Entity Name: SAVING FACE OF CENTRAL FLORIDA, INC

Current Principal Place of Business:

626 MAITLAND AVE
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

6278 N FEDERAL HWY
376
FT LAUDERDALE, FL 33308 US

Current Mailing Address:

626 MAITLAND AVE
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

6278 N FEDERAL HWY
376
FT LAUDERDALE, FL 33308 US

FEI Number: 86-1149292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAFRA, DEBBIE
626 MAITLAND AVE
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

SAFRA, DEBBIE
6278 N FEDERAL HWY #376
FT LAUDERDALE, FL 33308 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:

02/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SAFRA, DEBBIE
Address: 626 MAITLAND AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SAFRA, DEBBIE
Address: 6278 N FEDERAL HWY #376
City-St-Zip: FT LAUDERDALE, FL 33308 US

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: DEBBIE SAFRA

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

Date