

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095296

FILED
Jan 13, 2009
Secretary of State

Entity Name: SAWVAS, INC.

Current Principal Place of Business:

3122 GOLFVIEW RD
SEBRING, FL 33875 US

New Principal Place of Business:

Current Mailing Address:

3122 GOLFVIEW RD
SEBRING, FL 33875 US

New Mailing Address:

FEI Number: 20-5233002 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABLES, CLIFFORD M III
551 SOUTH COMMERCE AVENUE
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

FULCHER, ROBERT W SR
3122 GOLFVIEW RD
SEBRING, FL 33875 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: ROBERT W. FULCHER SR.

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MAKRIS, BASIL
Address: 2107 NORTH WEST SHORE DRIVE
City-St-Zip: AVON PARK, FL 33825 US

Title: DVPT () Delete
Name: KARABINS, GEORGE
Address: 401 MAC LANE
City-St-Zip: SEBRING, FL 33875 US

Title: DS () Delete
Name: MENDOZA, JUAN GABRIEL
Address: 4911 STURGEON DRIVE
City-St-Zip: SEBRING, FL 33870 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: FULCHER, ROBERT W SR
Address: 4408 SEBRING AV
City-St-Zip: SEBRING, FL 33875 US

Title: DP (X) Change () Addition
Name: KARABINS, GEORGE
Address: 401 MAC LANE
City-St-Zip: SEBRING, FL 33875 US

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: ROBERT W. FULCHER SR

DVP

01/13/2009

Electronic Signature of Signing Officer or Director

Date