2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# P06000117765

Entity Name: STYLE SAVVY, INC.

Current Principal Place of Business:

926 W. MICHIGAN AVE
PENSACOLA, FL 32505 US

New Principal Place of Business:

Current Mailing Address:

926 W. MICHIGAN AVE
PENSACOLA, FL 32505 US

New Mailing Address:

30 VASSAR DR.
PENSACOLA, FL 32506 US

FEI Number: 20-5542443 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN ROAD
SUITE 400
MIAMI BEACH, FL 33139 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: PRES ( ) Delete
Name: WILLIAMS, LEATHA D
Address: 926 W. MICHIGAN AVE
City-St-Zip: PENSACOLA, FL 32505 US

Title: TRES ( ) Delete
Name: WILLIAMS, LEATHA D
Address: 926 W. MICHIGAN AVE
City-St-Zip: PENSACOLA, FL 32505 US

Title: SECT ( ) Delete
Name: WILLIAMS, LEATHA D
Address: 926 W. MICHIGAN AVE
City-St-Zip: PENSACOLA, FL 32505 US

Title: DIR ( ) Delete
Name: WILLIAMS, LEATHA D
Address: 926 W. MICHIGAN AVE
City-St-Zip: PENSACOLA, FL 32505 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: WILLIAMS, LEATHA D
Address: 30 VASSAR DR.
City-St-Zip: PENSACOLA, FL 32506 US

Title: TRES (X) Change ( ) Addition
Name: WILLIAMS, LEATHA D
Address: 30 VASSAR DR.
City-St-Zip: PENSACOLA, FL 32506 US

Title: SECT (X) Change ( ) Addition
Name: WILLIAMS, LEATHA D
Address: 30 VASSAR DR.
City-St-Zip: PENSACOLA, FL 32506 US

Title: DIR (X) Change ( ) Addition
Name: WILLIAMS, LEATHA D
Address: 30 VASSAR DR.
City-St-Zip: PENSACOLA, FL 32506 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: LEATHA D. WILLIAMS PRES 04/29/2007

Electronic Signature of Signing Officer or Director Date