

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000048703

1. Entity Name

SAVANA FARMS INC.

FILED

Apr 27, 2001 8:00 am  
Secretary of State

04-27-2001 90377 012 \*\*\*150.00

Principal Place of Business

785 CRANDON BLVD  
#806  
KEY BISCAYNE FL 33149  
US

Mailing Address

785 CRANDON BLVD  
#806  
KEY BISCAYNE FL 33149  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0593886

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORALES, LUZ A  
17630 SW 4TH CT  
PEMBROKE PINES FL 33020

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-statuting)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP  
NAME ECHEVERRI, LUZ M ☐ Delete  
STREET ADDRESS 785 CRANDON BLVD STE 806  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ Change ☐ Addition:  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DVP  
NAME ECHEVERRI, GLORIA S ☐ Delete  
STREET ADDRESS 785 CRANDON BLVD STE 806  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ Change ☐ Addition:  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DS  
NAME ECHEVERRI, FERNANDO ☐ Delete  
STREET ADDRESS 785 CRANDON BLVD STE 806  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ Change ☐ Addition:  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DVP  
NAME ECHEVERRI, GERMAN ☐ Delete  
STREET ADDRESS 785 CRANDON BLVD #806  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ Change ☐ Addition:  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DVP  
NAME ECHEVERRI, OLGA LUCIA ☐ Delete  
STREET ADDRESS 785 CRANDON BLVD STE 806  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ Change ☐ Addition:  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DVP  
NAME MORALES, LUZ A ☐ Delete  
STREET ADDRESS 785 CRANDON BLVD STE 806  
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ Change ☐ Addition:  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)