

FILE NOW - FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 26, 1999 8:00 am
Secretary of State

08-26-1999 90004 023 ***150.00

DOCUMENT # P97000091038

Corporation Name
SAVE ON ELECTRONICS & APPLIANCES, INC.

Place of Business
OKEECHOBEE BLVD
#546 & 547
PALM BEACH FL 33417

Mailing Address
5700 OKEECHOBEE BLVD
BAY #546 & 547
WEST PALM BEACH FL 33417



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/21/1997	
4. FEI Number 65-0785363	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent ADDA, EYTAN 8084 NW 15 MANOR PLANTATION FL 33322	
10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN: 12	
PD ADDA, EYTAN 8084 NW 15 MANOR PLANTATION FL 33322	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
VD AZMI, AHARON OREN 1105 NW 80 TERRACE #F MARGATE FL 33063	<input type="checkbox"/> DELETE	1.2 NAME	
SD ADDA, INBAR 8084 NW 15 MANOR PLANTATION FL 33322	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS	
TD AZMI, AHARON 1105 NW 80 TERRACE #F MARGATE FL 33063	<input type="checkbox"/> DELETE	1.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	2.2 NAME	
	<input type="checkbox"/> DELETE	2.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	3.2 NAME	
	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	4.2 NAME	
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	5.2 NAME	
	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> DELETE	6.2 NAME	
	<input type="checkbox"/> DELETE	6.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	6.4 CITY-ST-ZIP	

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

CR2E034 (11/98)

SAVE ON ELECTRONICS
& APPLIANCES, INC.
5700 OKEECHOBEE BLVD
BAY 546/547
WEST PALM BEACH, FL 33417

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6096661-90004-23

JULY 6, 1999

FLORIDA DEPT OF STATE
ANNUAL REPORTS FILING
DIVISION OF CORPORATIONS
409 E GAINES STREET
TALLAHASSEE, FL 32399

RE: FEI 65-0785363
DOCUMENT P97000091038

TO WHOM IT MAY CONCERN:

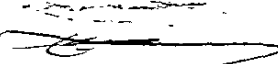
I WROTE TO YOUR OFFICE MAY 26, 1999 CONCERNING MY PAYMENT MADE
TO YOUR OFFICE FOR THE ANNUAL REPORT .

I HAVE NOT TO DATE RECEIVED ACKNOWLEDGEMENT OF MY LETTER STATING
SUCH NOR HAVE I RECEIVED MY CHECK BACK FROM THE BANK.

PLEASE LET ME KNOW WHAT THE STATUS IS REGARDING MY ACCOUNT.

THANK YOU.

YOURS TRULY,


SAVE ON ELECTRONICS