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Apr 18 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S21985

(4)

1. Corporation Name

SAVA SAVA, INC.

Principal Place of Business

1507 E. PINE AVENUE  
ORLANDO FL 32824  
US

Mailing Address

1507 E. PINE AVENUE  
ORLANDO FL 32824-7806  
US

2. Principal Place of Business

21 1599 S.W. 30th AVE SUITE 20

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 BOYNTON BEACH

27

City & State

City & State

23 FL

28

24 33426

25 PALM BEACH

29

30

9. Name and Address of Current Registered Agent

SKORY, GREGORY A.  
1507 E PINE AVE  
ORLANDO FL 32824

3. Date Incorporated or Qualified

01/01/1991

3a. Date of Last Report

04/25/1996

4. FEI Number

59-3051348

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

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

11. 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

12. OFFICERS AND DIRECTORS

TITLE STD  
NAME SKORY, GREGORY A  
STREET ADDRESS 6172 W GATE DR #203  
CITY- ST- ZIP ORLANDO FL

TITLE PD  
NAME SOOD, SANJAY S  
STREET ADDRESS 6172 W GATE DR #203  
CITY- ST- ZIP ORLANDO FL

TITLE D  
NAME GULATI, MANJU  
STREET ADDRESS 10716 SANDY RUN TRAIL  
CITY- ST- ZIP FAIRFAX VA

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. Address Change/Change TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME 2710 S.W. 23rd Cranbrook Dr.  
1.3 STREET ADDRESS Boynton Beach, FL 33436  
1.4 CITY- ST- ZIP

2.1 TITLE  
2.2 NAME SAME AS ABOVE  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

14. I do 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.

SIGNATURE:

GREGORY A. SKORY  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0004382

CR2E034 (9/96)