

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V39421

FILED
Apr 28, 2004
Secretary of State

Entity Name: SAVOY INVESTMENT CORPORATION

Current Principal Place of Business:

7783 NORTHWEST 44TH STREET
SUNRISE, FL 33351

New Principal Place of Business:

13130 W SR 84
DAVIE, FL 33325

Current Mailing Address:

7783 NORTHWEST 44TH STREET
SUNRISE, FL 33351

New Mailing Address:

13130 W SR 84
DAVIE, FL 33325

FEI Number: 65-0337741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORN, GEORGE
7783 N.W. 44TH STREET
SUNRISE, FL 33351

Name and Address of New Registered Agent:

COHEN, SHEILA
13130 W SR 84
DAVIE, FL 33325

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: SHEILA COHEN

04/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLAKMAN, BARBARA,
Address: 7783 NW 44TH ST
City-St-Zip: SUNRISE, FL

Title: V () Delete
Name: SILVERSTEIN, HELENE,
Address: 7783 NW 44TH ST
City-St-Zip: SUNRISE, FL

Title: S (X) Delete
Name: HORN, GEORGE,
Address: 7783 NW 44TH ST
City-St-Zip: SUNRISE, FL

Title: T () Delete
Name: COHEN, SHEILA,
Address: 7783 NW 44TH ST
City-St-Zip: SUNRISE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SLAKMAN, BARBARA
Address: 13130 W SR 84
City-St-Zip: DAVIE, FL 33325

Title: V (X) Change () Addition
Name: SILVERSTEIN, HELENE
Address: 13130 W SR 84
City-St-Zip: DAVIE, FL 33325

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: COHEN, SHEILA
Address: 13130 W SR 84
City-St-Zip: DAVIE, FL 33325

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA SLAKMAN

P

04/28/2004

Electronic Signature of Signing Officer or Director

Date