

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 607162

FILED
Jan 27, 2005
Secretary of State

Entity Name: L.A.V. INVESTMENTS, INC.

Current Principal Place of Business:

1801 CHANOELLE CT
PORT ORANGE, FL 32128

New Principal Place of Business:

1801 CHANDELLE CT
PORT ORANGE, FL 32128

Current Mailing Address:

1801 CHANOELLE CT
PORT ORANGE, FL 32128

New Mailing Address:

1801 CHANDELLE CT
PORT ORANGE, FL 32128

FEI Number: 59-1886329

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHREIBER, HENRY
1801 CHANDELLE CT
PORT ORANGE, FL 32128 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: P () Delete
Name: SCHREIBER, HENRY,
Address: 1800 CHANDELLE COURT
City-St-Zip: PORT ORANGE, FL 32128

Title: VP () Delete
Name: SCHREIBER, ADRIAN
Address: 3606 S BELCHER DRIVE
City-St-Zip: TAMPA, FL 33624

Title: ST () Delete
Name: SCHREIBER, LESLIE
Address: 4095 HARDIE COCONUT GROVE
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: SCHREIBER, MARGARET
Address: 1801 CHANDELLE COURT
City-St-Zip: PORT ORANGE, FL 32128

Title: VP () Delete
Name: SCHREIBER, VANESSA
Address: 13326 MAXELLA AVE #4
City-St-Zip: MARINA DEL REY, CA 90292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: HENRY SCHREIBER

PRES

01/27/2005

Electronic Signature of Signing Officer or Director

_____ Date