2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Feb 12, 2009
Secretary of State

DOCUMENT# P07000004069

Entity Name: GV FINANCIAL CORP.

Current Principal Place of Business:

630 E. SAMPLE RD.
POMPANO BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

630 E. SAMPLE RD.
POMPANO BEACH, FL 33064 US

New Mailing Address:

FEI Number: 20-8259735 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATOS, HERBERT
630 E. SAMPLE ROAD
POMPANO BEACH, FL 33064 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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MATOS, HERBERT
Address: 630 E. SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

Title: VP ( ) Delete
Name: MATOS, SOLANGE
Address: 630 E. SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

Title: CCO ( ) Delete
Name: MATOS, HERBERT
Address: 630 E.SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

Title: CFO ( ) Delete
Name: FREITAS, RONILDO A
Address: 630 E.SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

Title: COO ( ) Delete
Name: MATOS, SOLANGE
Address: 630 E .SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

Title: CEO (X) Delete
Name: FREITAS, RONILDO A
Address: 630 E .SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

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: CEO (X) Change ( ) Addition
Name: FREITAS, RONILDO A
Address: 630 E.SAMPLE ROAD
City-St-Zip: POMPANO BEACH, FL 33064

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 exemption stated in Chapter 119, 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: HERBERT MATOS P 02/12/2009

Electronic Signature of Signing Officer or Director Date