

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037878

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** A N V, CORP.

**Current Principal Place of Business:**

1208 NORTH STATE ROAD 7  
HOLLYWOOD, FL 33021 US

**New Principal Place of Business:**

6015 GARFIELD STREET  
HOLLYWOOD, FL 33024 US

**Current Mailing Address:**

6015 GARFIELD STREET  
HOLLYWOOD, FL 33021

**New Mailing Address:**

6015 GARFIELD STREET  
HOLLYWOOD, FL 33024

**FEI Number:** 65-0412838

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GONZALEZ, IRVING J.  
1319 N STATE RD 7  
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

GONZALEZ, IRVING J.  
6015 GARFIELD STREET  
HOLLYWOOD, FL 33024 US

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: IRVING GONZALEZ

04/29/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: VILARINO, ANTONIO  
Address: 4000 N UNIVERSITY DR  
City-St-Zip: SUNRISE, FL 33351

Title: VPSD ( ) Delete  
Name: VILARINO, NILDA E  
Address: 4000 N UNIVERSITY DR  
City-St-Zip: SUNRISE, FL 33351

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ANTONIO VILARINO

PSD

04/29/2005

Electronic Signature of Signing Officer or Director

Date