## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000047047

Entity Name: MVH INVESTMENTS, INC.

VOEGTLIN, NANCY

401 EAST STATE ROAD 436

CASSELBERRY, FL 32707

Name:

Address:

City-St-Zip:

FILED Mar 18, 2005 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
	STATE ROAI ERRY, FL 32		US			
Current Mailing Address:				New Mailing Address:		
	STATE ROAI ERRY, FL 32		US			
FEI Number	: 59-3263263	FEI	Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )
Name and	Address of	Curre	nt Registered Agent:	Name and	Address of I	New Registered Agent:
MAITLANE The above	AILLES DRIV D, FL 32751 named entity e of Florida.	US	ts this statement for the p	urpose of changing i	ts registered (	office or registered agent, or both,
SIGNATU						
OIOIVATOI		nic Sig	nature of Registered Age	ent		 Date
Election Car	mpaign Financii	ng Trus	t Fund Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	D ( VEIGLE, P. JA 401 EAST STA CASSELBERF	ATE RO	AD 436	Title: Name: Address: City-St-Zip:	(	) Change ()Addition
Title: Name: Address: City-St-Zip:	D ( VEIGLE, CHAI 401 EAST STA CASSELBERF	ATE RO	AD 436	Title: Name: Address: City-St-Zip:	(	) Change ()Addition
Title: Name: Address: City-St-Zip:	D ( HEROLD, KEN 401 EAST STA CASSELBERF	ATE RO	AD 436	Title: Name: Address: City-St-Zip:	S (X VOEGTLIN, NA 401 EAST STA CASSELBERR	TE ROAD 436
Title:	S ()	K) Delete	e	Title:	(	) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: NANCY VOEGTLIN S 03/18/2005