

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State
 04-30-2001 90115 017 ***158.75

DOCUMENT # P98000047531

1. Entity Name
A.V. SERVICES INTERNATIONAL CORP.

Principal Place of Business Mailing Address
3292 STIRLING RD **3292 STIRLING RD**
HOLLYWOOD FL 33021 **HOLLYWOOD FL 33021**
US **US**

00041354



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0839397** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name **Aurelio A. Pedro**
 Street Address (P.O. Box Number is Not Acceptable)
782 N.W. Le Jeune Rd. # 516
 City **Miam.** FL Zip Code **33126**

8. 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 **Aurelio Pedro** DATE **4/4/01**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE	NAME	TITLE	NAME
PSD	VILAR, CARMEN		
1574 YELLOWHEART WAY	1574 YELLOWHEART WAY		
HOLLYWOOD FL 33019	HOLLYWOOD FL 33019		
VD	VILAR, RAUL E		
1574 YELLOWHEART WAY	1574 YELLOWHEART WAY		
HOLLYWOOD FL 33019	HOLLYWOOD FL 33019		
TD	VILAR, ENRIQUE R		
1574 YELLOWHEART WAY	1574 YELLOWHEART WAY		
HOLLYWOOD FL 33019	HOLLYWOOD FL 33019		

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE **4/19/01** DAYTIME PHONE # **954-966-9300**

U03123

CR2E034 (10/00)