

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 607162

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

**Current Principal Place of Business:**

1801 CHANDELLE CT  
PORT ORANGE, FL 32128

**Current Mailing Address:**

1801 CHANDELLE CT  
PORT ORANGE, FL 32128

**FEI Number:** 59-1886329

**Certificate of Status Desired:** No

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

SCHREIBER, HENRY B  
1801 CHANDELLE CT  
PORT ORANGE, FL 32128 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRES  
Name            SCHREIBER, HENRY B  
Address        1800 CHANDELLE COURT  
City-State-Zip: PORT ORANGE FL 32128

Title            VP  
Name            SCHREIBER, ADRIAN  
Address        3606 S BELCHER DRIVE  
City-State-Zip: TAMPA FL 33624

Title            ST  
Name            SCHREIBER, LESLIE  
Address        4095 HARDIE COCONUT GROVE  
City-State-Zip: MIAMI FL 33133

Title            D  
Name            SCHREIBER, MARGARET  
Address        1801 CHANDELLE COURT  
City-State-Zip: PORT ORANGE FL 32128

Title            VP  
Name            SCHREIBER, VANESSA  
Address        1422 ABBOT KINNEY BLVD.  
City-State-Zip: VENICE FL 90291

*I hereby 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 all other like empowered.*

**SIGNATURE:** SCHREIBER, HENRY

**PRES**

**02/01/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date