

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 484557

Entity Name: M. SALVI, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

700 NORTH 62ND AVE
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

700 NORTH 62ND AVE
HOLLYWOOD, FL 33024 US

New Mailing Address:

FEI Number: 11-1764824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVI, MARIO
700 N. 62ND AVE
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

SALVI, PHILIP A
700 N. 62ND AVE
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: PHILIP A. SALVI

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: SALVI, MARIO
Address: 2728 NE 24 STR
City-St-Zip: LIGHHOUSE PT, FL

Title: VT () Delete
Name: SALVI, PHILIP A
Address: 5100 N.W. 83 LANE
City-St-Zip: CORAL SPRING, FL 33087

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SALVI, PHILIP A
Address: 5100 N.W. 83 LANE
City-St-Zip: CORAL SPRING, FL 33087

I hereby certify that the information supplied with this filing does not qualify for the 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: PHILIP A. SALVI

VP

04/28/2006

Electronic Signature of Signing Officer or Director

Date