


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2007 08:00 AM
Secretary of State

DOCUMENT # 605388 1. Entity Name BONAVISTA HOLDINGS, INC.	
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Principal Place of Business 120 SOUTH UNIVERSITY DR SUITE B PLANTATION, FL 33324	Mailing Address 120 SOUTH UNIVERSITY DRIVE SUITE B PLANTATION, FL 33324
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01182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1868796	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FEINSTEIN, MARVIN, ESQ. 120 SOUTH UNIVERSITY DRIVE SUITE B PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FEINSTEIN, BARRY 1384 GREENE AVENUE SUITE 300 MONTREAL, QUEBEC CANADA. H3Z 2B1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FEINSTEIN, MARVIN 120 SOUTH UNIVERSITY DR. SUITE B PLANTATION, FL 33324
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01/26/07-80117-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 687, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Marvin Feinstein / **22/07** **954 423-9749**