2007 FOR PROFIT CORPORATION SANNUAL REPORT

DOCUMENT # F01000005323

Entity Name
 MVL GROUP, INC.



Principal Place of Business Mailin

1061 E. INDIANTOWN ROAD JUPITER, FL 33477

Mailing Address
% QUICK TEST, INC.
1061 E. INDIANTOWN ROAD - SUITE 204
JUPITER, FL 33477

FILED Apr 30, 2007 08:00 AM Secretary of State



CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 06-1539646 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODGERS, ADAM 1061 E. INDIANTOWN ROAD JUPITER, FL 33477

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

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No Chg-P

04262007

 The above named entity submits this statement for the the obligations of registered agent. 	ourpose of changing	its registered office or	registered agent, or bot	h, in the State of Florida.	am familiar with, and accept
Signature, typed or printed name of registered agent and title	if applicable. (N	NOTE: Registered Agent signatu	re required when reinstating)	D	ATE
FILE NOW!! FFF 10 64F0 00	9. Election Cam	paign Financing	\$5 NO May Be		

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE NAME LEFFERDINK, M. VAN STREET ADDRESS 1061 E. INDIANTOWN ROAD CITY-ST-ZIP JUPITER, FL 33477 S RODGERS, ADAM L NAME STREET ADDRESS 1061 E. INDIANTOWN ROAD CITY-ST-ZIP JUPITER, FL 33477 TITLE DEAN, EDWARD W NAME STREET ADDRESS 1061 E, INDIANTOWN RD. CITY-ST-ZIP JUPITER, FL 33477 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

U00000744876 05/16/07-80006-015 150.00

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12. Thereby 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 607, 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 OF PRINTED NAME OF SIGNING OFFICER OF DANSCTOR

7 748 093/ Dayline Phone #