

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L32963

Entity Name: LARVEN, INC.

FILED
Jul 25, 2009
Secretary of State

Current Principal Place of Business:

C/O IVEN TAUB
12 DANTE STREET
LARCHMONT, NY 10538 US

New Principal Place of Business:

Current Mailing Address:

C/O L.S. TAUB
1447 SEVILLE ROAD
SANTA FE, NM 875054647 US

New Mailing Address:

FEI Number: 11-2993587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESNICK, IRVING
1200 N. FEDERAL HWY - SUITE 209
BOCA RATON, FL 334322845 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVS () Delete
Name: TAUB, IVEN R.
Address: 12 DANTE ST.
City-St-Zip: LARCHMONT, NY 10538

Title: PTD () Delete
Name: TAUB, LAWRENCE S.
Address: 1447 SEVILLE RD.
City-St-Zip: SANTE FE, NM 87505

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LAWRENCE TAUB

PRES

07/25/2009

Electronic Signature of Signing Officer or Director

Date