


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # L95031 1. Entity Name A. V. PROPERTIES, INC.	
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Principal Place of Business 4280 GALT OCEAN DRIVE #8P FT. LAUDERDALE, FL 33308-5425	Mailing Address PO BOX 216, EASTWOOD STATION SYRACUSE, NY 13206-216
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04222008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0213659	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GARDNER, R.M.
 500 E BROWARD BLVD
 SUITE 1600
 FT. LAUDERDALE, FL 33394

DO NOT WRITE
IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

U00000934216
05/23/08-80023-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	DV
NAME	FALSO, ADOLPH V.
STREET ADDRESS	1730 VENEZIA WAY
CITY-ST-ZIP	NAPLES, FL 34105
TITLE	DP
NAME	ORLANDO, FELIPPA F
STREET ADDRESS	4280 GALT OCEAN DR, 14A
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308
TITLE	ST
NAME	VERBECK, JON S
STREET ADDRESS	4509 SEVEN PINES DR
CITY-ST-ZIP	CAZENOVIA, NY 13035
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 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: Felippa F. Orlando, President Date: 4/18/08 Daytime Phone #: 954-561-7495