## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M31942

Entity Name: HOVIA ENTERPRISES, INC.

FILED Jul 07, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
2745 LONG STE B NAPLES, F		US			
Current Mailing Address:			New Mailing Address:		
2745 LONG STE B NAPLES, F		US			
FEI Number:	65-0001336	FEI Number Applied For ( ) FEI Nur	mber Not Appli	cable ( ) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SEMPF, AL 2745 LONG NAPLES, F	BOAT DR	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:					
	Electro	onic Signature of Registered Agent		Date	
		193(2)(b), F.S., the corporation did not receive ting Trust Fund Contribution ( ).	the prior notice	s.	
			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P ( SEMPF, ALE 2745 LONGB NAPLES, FL	OAT DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V.P ( POWERS, BI 2488 LONGB NAPLES, FL	OAT DR;	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEMPF, LETA 28-225 COUN	)Delete A TR. ITRY HILL DR ON N2E 3J6 CA	Title: Name: Address: City-St-Zip:	TR (X) Change ( ) Addition SEMPF, LETA TR. 805-55 GREEN VALLEY DRIVE KITCHENER, ON N2P 1Z6 CA	
Title: Name: Address: City-St-Zip:	(	( ) Delete	Title: Name: Address: City-St-Zip:	MKTG () Change (X) Addition MIKHAILOV, OLEG 4434 EXCHANGE AVE; #12 NAPLES, FL 34104	

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: ALEX SEMPF P 07/07/2006