

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90212 015 ***158.75

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P00000035165

1. Entity Name
JIVAN, INC.



Principal Place of Business
ATTN: GEORGE D. PERLMAN, ESQ.
701 BRICKELL AVENUE SUITE 3000
MIAMI, FL 33131

Mailing Address
ATTN: GEORGE D. PERLMAN, ESQ.
701 BRICKELL AVENUE SUITE 3000
MIAMI, FL 33131

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04062007 Chg-P CR2E034 (12/06)

4. FEI Number
65-1035218

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GEORGE D. PERLMAN, P.A.
701 BRICKELL AVENUE SUITE 3000
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 PD
DODARD, PHILPPE ☐ Delete
STREET ADDRESS C/O 701 BRICKELL AVE STE. #3000
CITY-ST-ZIP MIAMI, FL 33131

TITLE
NAME VD
FRISCH, MICHELE ☐ Delete
STREET ADDRESS C/O 701 BRICKELL AVE STE. #3000
CITY-ST-ZIP MIAMI, FL 33131

TITLE
NAME TSD
JAAR, LAURA ☐ Delete
STREET ADDRESS C/O 701 BRICKELL AVE STE. #3000
CITY-ST-ZIP MIAMI, FL 33131

TITLE
NAME C
JAAR, ROGER ☐ Delete
STREET ADDRESS C/O 701 BRICKELL AVE STE. #3000
CITY-ST-ZIP MIAMI, FL 33131

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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: ☒

LAURA JAAR - Treasurer

4/17/07

305-597-6267

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #