2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 02, 2007 08:00 AM **DOCUMENT # P00000072198 Secretary of State** 1. Entity Name ANVER CORP. Principal Place of Business Mailing Address 9301 NE 6 AVE 9301 NE 6 AVE C 309 C 309 MIAMI, FL 33138 MIAMI, FL 33138 01312007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1032932 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE SERRANO, JULIO E 1290 NE 101 ST MIAMI SHORES, FL 33138 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. DATE (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE SERRANO, JULIO E NAME STREET ADDRESS 1290 NE 101 ST CITY-ST-ZIP MIAMI SHORES, FL 33138 U000000617268 TITLE 02/07/07-80068-009 150.00 NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filling 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 direction of the corporation or the receiver or trustee employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 all other like empowered. changed, or on an attachment with an address

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR