

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000094832

Entity Name: JVD FINANCIAL SERVICES, INC.

FILED
Jun 14, 2007
Secretary of State

Current Principal Place of Business:

5747 TIMUQUANA ROAD
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

5747 TIMUQUANA ROAD
ATT: DEBORAH DAKA
JACKSONVILLE, FL 32210 US

New Mailing Address:

5747 TIMUQUANA ROAD
ATT: DEDRIX DAKA
JACKSONVILLE, FL 32210 US

FEI Number: 59-3673939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAKA, DEBORAH A
5747 TIMUQUANA RODA
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

DAKA, DEDRIX
5747 TIMUQUANA RODA
JACKSONVILLE, FL 32210 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: DEDRIX DAKA

06/14/2007

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: D () Delete
Name: DAKA, DEDRIX
Address: 3734 ALDINGTON DR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: DAKA, DEBORAH A
Address: 3734 ALDINGTON DR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: HENRY, ERTWYN
Address: 3734 ALDINGTON DR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: DAKA, DEDRIX B
Address: 3766 BRYNER DR.
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: DAKA, JENALA V
Address: 1611 PEBBLE BEACH BLVD
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DAKA, DEBORAH
Address: 3734 ALDINGTON DR.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D (X) Change () Addition
Name: DAKA, DEDRIX A
Address: 3734 ALDINGTON DR.
City-St-Zip: JACKSONVILLE, FL 32210

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

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: DEDRIX DAKA

PRES

06/14/2007

Electronic Signature of Signing Officer or Director

Date