

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 01, 2006 8:00 am**  
**Secretary of State**

03-01-2006 90192 001 \*\*\*450.00

DOCUMENT # P01000108627

1. Entity Name  
RSV, CORP.



Principal Place of Business  
2450 SW 137TH AVENUE SUITE 234  
MIAMI, FL 33175

Mailing Address  
2450 SW 137TH AVENUE SUITE 234  
MIAMI, FL 33175

66003263



2. Principal Place of Business  
1200 Brickell Ave

3. Mailing Address  
1200 Brickell Ave

Suite, Apt. #, etc.

Ste 860

Suite, Apt. #, etc.

Ste 860

01042006

Chg-P

CR2E034 (11/05)

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

01-0554724

Applied For

Not Applicable

Zip

33131

Country

Zip

33131

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

LOPEZ, PETER M ESQ  
2450 SW 137TH AVENUE SUITE 234  
MIAMI, FL 33175

## 7. Name and Address of New Registered Agent

Name Peter m. Lopez, PA

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

1200 Brickell Ave.

Ste 860

City

miami

FL

Zip Code

33131

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

2/24/06

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME SOLORZANO, ANA CAROLINA  
STREET ADDRESS 2450 SW 137TH AVENUE SUITE 234  
CITY-ST-ZIP MIAMI, FL 33175

TITLE D ☐ Delete  
NAME VASQUEZ, REINA M  
STREET ADDRESS 2450 SW 137TH AVENUE SUITE 234  
CITY-ST-ZIP MIAMI, FL 33175

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME Solorzano, Ana Carolina  
STREET ADDRESS 1200 Brickell Ave., Ste 860  
CITY-ST-ZIP miami, FL 33131

TITLE ☒ Change ☐ Addition  
NAME Vasquez, Reina m.  
STREET ADDRESS 1200 Brickell Ave., Ste 860  
CITY-ST-ZIP miami, FL 33131

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director

2/24/06

Date

Daytime Phone #