2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P02000004385

1. Entity Name

J.V. INSTALLATIONS CORP.



FILED Jan 11, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

1310 W CENTRAL BLVD ORLANDO, FL 32805 1310 W CENTRAL BLVD ORLANDO, FL 32805



01092008

No Chg-P

CR2E034 (11/05)

4. FEI Number 80-0021765 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

VARGAS, JAMES 1310 W CENTRAL BLVD ORLANDO, FL 32805

SIGNATURE: 🖄

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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 tritle if applicable (NOTE: Registered Agent signature required when renstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			ncing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS GITY-SI-ZIP	D VARGAS, JAMES 1310 W. CENTRAL BLVD ORLANDO, FL 32805				U00000779035 01/11/08-80022-011 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY -ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I nereby 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.					

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR