


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000058857	
1. Entity Name DV ACQUISITIONS CORP.	

Principal Place of Business 1415 W. 15TH STREET RIVIERA BEACH, FL 33404	Mailing Address PO BOX 10448 WEST PALM BEACH, FL 33419-0448
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01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 03-0453105	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent VLASSIS, DENNIS 1415 W. 15TH ST RIVIERA BEACH, FL 33404
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**DO NOT WRITE
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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000587349 01/17/07-80029-018 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPD VLASSIS, DENNIS 1481 W 15TH STREET RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'NEILL, PAMELA 1315 S CLEVELAND-MASSILLON RD COPLEY, OH 44321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GRAVES, KEITH 1315 S CLEVELAND-MASSILLON RD COPLEY, OH 44321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VLASSIS, MARGOT 1481 W 15TH STREET RIVIERA BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Dennis Vlassis **Dennis Vlassis** 1-407 561-472-9220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #