

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 23, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000068847</b>	
1. Entity Name J.L.V. ENTERPRISES, INC.	
Principal Place of Business 10515 SW 109TH CT MIAMI, FL 33176-3308	Mailing Address 10515 SW 109TH CT MIAMI, FL 33176-3308



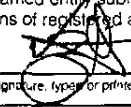
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03022005 No Chg-P CR2E034 (10/03)

4. FEI Number 02-0627477	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  VERDEJA, JORGE L 11900 SW 123RD PLACE MIAMI, FL 33186	<b>DO NOT WRITE IN THIS SPACE</b>
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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  3-18-05  
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstalling) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

<b>10. OFFICERS AND DIRECTORS</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERDEJA, JORGE L 11900 SW 123RD PLACE MIAMI, FL 33186
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALVEZ, ZENaida 11900 SW 123RD PLACE MIAMI, FL 33186
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03/23/05-80020-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: ZENaida GALVEZ  3-18-05 305-273-3316  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #