2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 09, 2007 08:00 A Secretary of State **DOCUMENT # P03000002027** 1. Entity Name PRBYVLH, INC. Principal Place of Business Mailing Address 3072 CENTER STREET **3072 CENTER STREET** COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133 CR2E034 (11/05) 01092007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 45-0495622 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HOPTA, VICTORIA L DO NOT WRITE 3072 CENTER STREET COCONUT GROVE, FL 33133 IN THIS SPACE 8. The above named ontity 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 aigneture required when remetating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME HOPTA, VICTORIA L STREET ADDRESS 3072 CENTER STREET CITY-ST-ZIP COCONUT GROVE, FL 33133 BUE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP ΠΊLΕ NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information to the contract and that my signature shall have the same legal effect as if made under oath; that I am an officer or director trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if I hereby certify that the information supplied indicated on this report or supplemental of the corporation or the receiver or trys. changed, or on an attachme **SIGNATURE**

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