

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 8:00 am**  
**Secretary of State**

04-27-2007 90223 008 \*\*\*150.00

**DOCUMENT # P03000005606**

1. Entity Name  
J.S.V. MANAGEMENT, INC.



Principal Place of Business

2860 W ST RD 84  
116  
FORT LAUDERDALE, FL 33312-4804

Mailing Address

2860 W ST RD 84  
116  
FORT LAUDERDALE, FL 33312-4804

60042943



03112007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1168113

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SANTIAGO, JOSE A  
10923 BLACKHAWK STREET  
PLANTATION, FL 33324

**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

Signature, typed or printed name of registered agent and when applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/07

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PVTs  
SANTIAGO, JOSE A  
10923 BLACKHAWK STREET  
PLANTATION, FL 33324

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SANTIAGO, JOSE A  
10923 BLACKHAWK STREET  
PLANTATION, FL 33324

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE A SANTIAGO

Date

4/25/07 954316-1600

Daytime Phone #