
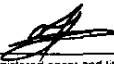



# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90349 028 \*\*\*150.00

<b>DOCUMENT # P03000022592</b> 1. Entity Name <b>J.V.N. CORPORATION</b>																											
Principal Place of Business <b>13381 SOUTHWEST 112TH LANE MIAMI, FL 33186</b>		Mailing Address <b>13381 SOUTHWEST 112TH LANE MIAMI, FL 33186</b>																									
2. Principal Place of Business <b>8290 LAKE DR.</b>		3. Mailing Address <b>8290 LAKE DR</b>																									
Suite, Apt. #, etc. <b># 544</b>		Suite, Apt. #, etc. <b># 544</b>																									
City & State <b>MIAMI, FL</b>		City & State <b>MIAMI, FL</b>																									
Zip <b>33166</b>		Zip <b>33166</b>																									
Country		Country																									
4. FEI Number <b>32-0058727</b>		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>NADAL, JOSE V 13381 SOUTHWEST 112TH LANE MIAMI, FL 33186</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>8290 LAKE DR # 544</b> City <b>MIAMI</b> <b>FL</b> Zip Code <b>33166</b>																									
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  DATE <b>4-13-2004</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																											
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P</td> <td style="width:10%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>NADAL, JOSE V</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>13381 SOUTHWEST 112TH LANE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33186</td> <td></td> </tr> </table>		TITLE	P	<input type="checkbox"/> Delete	NAME	NADAL, JOSE V		STREET ADDRESS	13381 SOUTHWEST 112TH LANE		CITY-ST-ZIP	MIAMI, FL 33186		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">8290 LAKE DR. # 544</td> <td style="width:10%; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>MIAMI, FL 33166</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	8290 LAKE DR. # 544	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	MIAMI, FL 33166		STREET ADDRESS			CITY-ST-ZIP		
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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: 		Date <b>4-13-2004</b> Daytime Phone # <b>305 219 0572</b>																									
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>																									