

**2007 FOR PROFIT CORPORATION--
ANNUAL REPORT**

FILED
Mar 29, 2007 08:00 A
Secretary of State

DOCUMENT # P03000033155	
1. Entity Name NVS PKG. CORP.	

Principal Place of Business 1440 CORAL RIDGE DR POMPANO BEACH, FL 33071	Mailing Address 1440 CORAL RIDGE DR POMPANO BEACH, FL 33071
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01122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 16-1671219	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

**LAUDANDO, JOSEPH
10983 NW 70TH CT.
PARKLAND, FL 33076**

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

10. OFFICERS AND DIRECTORS	
TITLE P	LAUDANDO, LISA A 10983 NW 70TH CT. PARKLAND, FL 33076
TITLE VP	LAUDANDO, JOESPH 10983 NW 70TH CT. PARKLAND, FL 33076
TITLE S	CANTELLA, JOHN E 10873 NW 70TH CT. PARKLAND, FL 33076
TITLE NAME	
TITLE NAME	
TITLE NAME	

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04/04/07-80039-011 150.00

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: JOHN CANTELLA 3/26/07 954-796-8760

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #