

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000045787

**FILED**  
**Jul 05, 2007**  
**Secretary of State**

**Entity Name:** KAVIS PRODUCTION SERVICES, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

204 CANARY ISLAND CIRCLE  
DAVENPORT, FL 33837

**Current Mailing Address:**

**New Mailing Address:**

204 CANARY ISLAND CIRCLE  
DAVENPORT, FL 33837

FEI Number: 51-0478595      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

KAVIS, DIANE L  
204 CANARY ISLAND CIRCLE  
DAVENPORT, FL 33837      US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: KAVIS, WILLIAM J  
Address: 204 CANARY ISLAND CIRCLE  
City-St-Zip: DAVENPORT, FL 33837

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VSTD      ( ) Delete  
Name: KAVIS, DIANE L  
Address: 204 CANARY ISLAND CIRCLE  
City-St-Zip: DAVENPORT, FL 33837

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM J KAVIS

PD

07/05/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date