2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000059662

1. Entity Name
JCV AIR SALES, INC.



Principal Place of Business

Mailing Address

21895 LAKE FORREST CIRCLE - SUITE 103 BOCA RATON, FL 33433 21895 LAKE FORREST CIRCLE - SUITE 103 BOCA RATON, FL 33433 FILED Apr 10, 2007 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

03122007 No Chg-P CR2E034 (11/05)

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VELEZ, JUAN C. 21895 LAKE FORREST CIRCLE - SUITE 103 BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

				•••	IIIIO OI AOL
	named entity submits this statement for the p tions of registered agent.	ourpose of changing its registere	ed affice or r	egistered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable. (NOTE Registered	d Agent signature	required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution	ocing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
NAME STREET ADDRESS CITY-ST-ZIP	D VELEZ, JUAN C. 21895 LAKE FORREST CIRCLE - SU BOCA RATON, FL 33433	ITE 103			Hooooooaaa
NAME STREET ADDRESS CITY - ST - ZIP					U00000697742 04/18/07-80051-025 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
IITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. Thereby certify that the information supplied with this filling 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

03-31-07

561-367-1373

Date

Daytima Phone #