

**2607 FOR PROFIT CORPORATION
ANNUAL REPORT**

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

04-27-2007 90192 004 ***150.00

DOCUMENT # P04000087119

1. Entity Name
B & V BILLING ADVISOR CORP



Principal Place of Business
**9131 FOUNTAINEBLEAU BLVD
APT 8
MIAMI, FL 33172**

Mailing Address
**9131 FOUNTAINEBLEAU BLVD
APT 8
MIAMI, FL 33172**

40085723



02272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1202782

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**VALDES, MARIA E
9131 FOUNTAINEBLEAU BLVD
APT 8
MIAMI, FL 33172**

**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 title if applicable.

(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
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
VALDES, MARIA E
9131 FOUNTAINEBLEAU BLVD, APT 8
MIAMI, FL 33172**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BONNIN, LEVY
9131 FOUNTAINBLEAU BLVD, APT 8
MIAMI, FL 33172**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BONNIN, LERY
9131 FOUNTAINBLEAU BLVD, APT 8
MIAMI, FL 33172**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Date

Daytime Phone #

04-17-07

305-551-1408

ATTACHMENT 40085723

~~#~~ 04000087119

Miami, April 20th 2007

Division of Corporations

To Whom it May Concern:

B & V Billing Advisor Corp's address
has changed, the new is:

10454 NW 5th Terrace
Miami, FL 33172

Thank you.

MA

Mano E Valdes