

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000091525

Entity Name: JAV DESIGNS CORP.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

4800 S PINE ISLAND RD  
65  
DAVIE, FL 33328

## **New Principal Place of Business:**

12850 WEST STATE ROAD 84  
1227  
DAVIE, FL 33325

## **Current Mailing Address:**

4800 S PINE ISLAND RD  
65  
DAVIE, FL 33328

## **New Mailing Address:**

12850 WEST STATE ROAD 84  
1227  
DAVIE, FL 33325

FEI Number: 20-1247182

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POSADA, SABRINA R  
4800 S PINE ISLAND RD  
65  
DAVIE, FL 33328 US

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

POSADA, SABRINA R  
12850 WEST STATE ROAD 84  
1227  
DAVIE, FL 33325 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: SABRINA POSADA

04/29/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: MS  
Name: POSADA, SABRINA R MS  
Address: 12850 WEST STATE ROAD 84 # 1227  
City-St-Zip: DAVIE, FL 33325

Title: MR  
Name: VERA, JAVIER A  
Address: 12850 WEST STATE ROAD 84 # 1227  
City-St-Zip: DAVIE, FL 33325

I hereby 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 all other like empowered.

SIGNATURE: SABRINA POSADA

OWN

04/29/2011

Electronic Signature of Signing Officer or Director

Date