2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000094508

Title:

Name:

Address:

City-St-Zip:

FILED Mar 07, 2007 Secretary of State

Entity Name: BERNAVIL MULTI SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 87 NW 15TH PLACE POMPANO BEACH, FL 33060 **Current Mailing Address: New Mailing Address:** P.O. BOX 272085 BOCA RATON, FL 33427 FEI Number: 20-0012626 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: BERNAVIL, PATRICK 5340 ELMHURST RD **UNIT E** WEST PALM BEACH, FL 33417 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BERNAVIL, PATRICK Name: Name: 5340 ELMHURST RD UNIT E Address: Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: Title: VPD Title: () Delete () Change () Addition Name: RACINE-BERNAVIL. JENNIFER Name: 4966 LINCOLN ROAD Address: Address: DELRAY BEACH, FL 33445 City-St-Zip: City-St-Zip: Title: Title: SD () Delete () Change () Addition BERNAVIL, SHELLY A Name: Name: 5340 ELMHURST RD UNIT E Address: Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: PATRICK BERNAVIL P 03/07/2007

() Delete

() Change (X) Addition

JEAN BAPTISTE, KILENE

POMPANO BEACH, FL 33064

2750 N CYPRESS RD