## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000075665

Entity Name: P.V. INTERIOR TRIM, CORP.

DA SILVA, SANTOS P

3491 NW 5TH TERRACE # 01

POMPANO BEACH, FL 33064

Name:

Address:

City-St-Zip:

FILED Mar 28, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 821 SW 5TH STREET 1605 63RD WAY SOUTH APT#3 WEST PALM BEACH, FL 33415 MIAMI, FL 33130 **Current Mailing Address: New Mailing Address:** 821 SW 5TH STREET 1605 63RD WAY SOUTH APT#3 WEST PALM BEACH, FL 33415 MIAMI, FL 33130 FEI Number: 20-2897336 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: TAX HOUSE CORPORATION 1261 E. SAMPLE RD. POMPANO BEACH, FL 33064 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: () Delete Title: (X) Change ( ) Addition VAZQUEZ, PABLO J VAZQUEZ, PABLO J Name: Name: 821 SW 5TH STREET APT #3 1605 63RD WAY SOUTH Address: Address: City-St-Zip: MIAMI, FL 33130 City-St-Zip: WEST PALM BEACH, FL 33415 Title: Title: () Change () Addition () Delete Name: SOARES, JOAO B Name: 3491 NW 5TH TERRACE # 01 Address: Address: POMPANO BEACH, FL 33064 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PABLO J VAZQUEZ P 03/28/2007