

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000092113

Entity Name: RE-VA, INC.

FILED  
Apr 21, 2008  
Secretary of State

## Current Principal Place of Business:

8540 BYRON AVE B-2  
MIAMI BCH, FL 33141

## New Principal Place of Business:

1145 NORMANDY DR.  
APT 402  
MIAMI BCH, FL 33141

## Current Mailing Address:

8540 BYRON AVE B-2  
MIAMI BCH, FL 33141

## New Mailing Address:

1145 NORMANDY DR.  
APT 402  
MIAMI BCH, FL 33141

FEI Number: 55-0900294

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAGNORSKY, BARBARA GLENDA  
8540 BYRON AVE B-2  
MIAMI BCH, FL 33141 US

## Name and Address of New Registered Agent:

MAGNORSKY, BARBARA GLENDA  
1145 NORMANDY DR.  
APT 402  
MIAMI BCH, FL 33141 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:

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MAGNORSKY, BARBARA GLENDA  
Address: 8540 BYRON AVE B-2  
City-St-Zip: MIAMI BCH, FL 33141

Title: D ( ) Delete  
Name: JOHNSON, LLOYD EARL  
Address: 5112 NW 11 DR  
City-St-Zip: POMPANO BCH, FL 33064

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MAGNORSKY, BARBARA GLENDA  
Address: 1145 NORMANDY DR. APT 402  
City-St-Zip: MIAMI BCH, FL 33141

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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

SIGNATURE: BGM

D

04/21/2008

Electronic Signature of Signing Officer or Director

Date