

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140656

Entity Name: M.V ENTERPRISES INC.

FILED
Feb 21, 2009
Secretary of State

Current Principal Place of Business:

985 SE 2ND PLACE
HIALEAH, FL 33010

New Principal Place of Business:

Current Mailing Address:

985 SE 2ND PLACE
HIALEAH, FL 33010

New Mailing Address:

FEI Number: 56-2541923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDES, MAYRA
985 SE 2ND PLACE
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

FERNANDEZ, MAYRA L
985 SE 2ND PLACE
HIALEAH, FL 33010 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: AMAURI L. FERNANDEZ

02/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VALDES, MAYRA
Address: 985 SE 2ND PLACE
City-St-Zip: HIALEAH, FL 33010

Title: D () Delete
Name: BITA, ALFREDO
Address: 985 SE 2ND PLACE
City-St-Zip: HIALEAH, FL 33010

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERNANDEZ, AMAURI L
Address: 985 SE 2ND PLACE
City-St-Zip: HIALEAH, FL 33010

Title: VP (X) Change () Addition
Name: VALDES, MAYRA
Address: 985 SE 2ND PLACE
City-St-Zip: HIALEAH, FL 33010

Title: MGR () Change (X) Addition
Name: AGUILAR, JOSE
Address: 985 SE 2ND PLACE
City-St-Zip: HIALEAH, FL 33010

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: AMAURI L. FERNANDEZ

P

02/21/2009

Electronic Signature of Signing Officer or Director

Date