2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2006 8:00 am
Secretary of State
04-25-2006 90115 023 ***158.75

DOCUMENT # P05000143202

1. Entity Name
SANVIL INTERNATIONAL INVESTMENT CORP.

Principal Place of Business	Mailing Address
400 KINGS POINT DR. #224 SUNNY ISLES BEACH, FL 33160	400 KINGS POINT DR. #224 SUNNY ISLES BEACH, FL 33160

2. Principal Place of Business	3. Mailing Address
6420 NW, 114 AVE	6420 NW, 114 AVE
Suite, Apt. #, etc.: #1306.	Suite, Apt. #, etc.: #1306
City & State: DORAL. FL 33178	City & State: DORAL. FL
Zip: 33178 Country: USA	Zip: 33178 Country: USA

04182006 Chg-P CR2E034 (11/05)

4. FEI Number: 57-1226389 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PARRA, HECTOR 400 KINGS POINT DR. #224 SUNNY ISLES BEACH, FL 33160	Name: HECTOR A. PARRA Street Address (P.O. Box Number is Not Acceptable): 6420 NW, 114 AVE. #1306 City: DORAL FL Zip Code: 33178

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PARRA, HECTOR 400 KINGS POINT DR. #224 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	(P) PARRA, HECTOR A. 6420 NW, 114 AVE #1306 DORAL. FL. 33178 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP VILLAMIZAR, LAURA 400 KINGS POINT DR. #224 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	(VP) VILLAMIZAR LAURA 6420 NW, 114 AVE. #1306 DORAL. FL. 33178 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SANCHEZ, OMAR 400 KINGS POINT DR. #224 SUNNY ISLES BEACH, FL 33160	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	(S) SANCHEZ, OMAR. 6420 NW 114 AVE. #1306. DORAL. FL 33178 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: H HECTOR A. PARRA - President 4.20.06 786.553.7795
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #