

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90460 012 ***150.00

DOCUMENT # P05000162924 1. Entity Name AMERICA'S IMMIGRATION VISAS, INC.																																																																																																																																			
Principal Place of Business 17830 N.E. 5TH AVENUE NORTH MIAMI BEACH, FL 33162			Mailing Address 17830 N.E. 5TH AVENUE NORTH MIAMI BEACH, FL 33162																																																																																																																																
2. Principal Place of Business - No P.O. Box # 5425 SW 41 STREET		3. Mailing Address 5425 SW 41 STREET																																																																																																																																	
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																	
City & State PEMBROKE PARK, FL		City & State PEMBROKE PARK, FL		4. FEI Number 86-1153857																																																																																																																															
Zip 33023		Country USA		5. Certificate of Status Desired NOT WANTED																																																																																																																															
6. Name and Address of Current Registered Agent LEWIS, MARGARET JEAN 17830 N.E. 5TH AVENUE NORTH MIAMI BEACH, FL 33162		7. Name and Address of New Registered Agent Name MARGARET JEAN LEWIS Street Address (P.O. Box Number is Not Acceptable) 5425 SW 41 STREET City PEMBROKE PARK, FL Zip Code 33023																																																																																																																																	
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: LEWIS, MARGARET JEAN (REGISTERED AGENT) : Margaret Lewis 4/24/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. 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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: LEWIS, MARGARET JEAN (REGISTERED AGENT) : Margaret Lewis 4/24/07 (954) 864-9472 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																			