

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000002518

Entity Name: LAV SERVICES, INC.

FILED
May 22, 2009
Secretary of State

Current Principal Place of Business:

2621 SW CAMEO BLVD
PORT ST LUCIE, FL 34953 US

New Principal Place of Business:

1050 SW MAJORCA AVE
PORT ST LUCIE, FL 34953 US

Current Mailing Address:

2621 SW CAMEO BLVD
PORT ST LUCIE, FL 34953 US

New Mailing Address:

1050 SW MAJORCA AVE
PORT ST LUCIE, FL 34953 US

FEI Number: 20-4059905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE ROAD
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SATLER, JORGE JR
Address: 2621 SW CAMEO BLVD
City-St-Zip: PORT ST LUCIE, FL 34953 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SATLER, JORGE JR
Address: 1050 SW MAJORCA AVE
City-St-Zip: PORT ST LUCIE, FL 34953 US

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: JORGE SATLER

OWNE

05/22/2009

Electronic Signature of Signing Officer or Director

_____ Date