

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000037441

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: IVP SALES AND PRODUCTS, INC.

## Current Principal Place of Business:

4260 NW 196TH ST  
OPA LOCKA, FL 33055

## New Principal Place of Business:

## Current Mailing Address:

4260 NW 196TH ST  
OPA LOCKA, FL 33055

## New Mailing Address:

FEI Number: 20-4622906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERNANDEZ, PABLO  
4260 NW 196TH ST  
OPA LOCKA, FL 33055 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HERNANDZ, PABLO  
Address: 4260 NW 196TH ST  
City-St-Zip: OPA LOCKA, FL 33055

Title: D ( ) Delete  
Name: VALDIVIA, ISABEL  
Address: 4260 NW 196TH ST  
City-St-Zip: OPA LOCKA, FL 33055

Title: D ( ) Delete  
Name: VALDIVIA, PEDRO L  
Address: 4260 NW 196TH ST  
City-St-Zip: OPA LOCKA, FL 33055

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HERNANDEZ, PABLO  
Address: 4260 NW 196TH ST  
City-St-Zip: OPA LOCKA, FL 33055

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

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: PABLO HERNANDEZ

D

04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date