2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082768

Name:

Address: City-St-Zip: LY-FLORES, SANDRA K

255 73RD STREET SOUTH

ST PETERSBURG, FL 33707

Entity Name: AMERIVINA GROUP, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4602 CENTRAL AVENUE ST PETERSBURG, FL 33711 **Current Mailing Address: New Mailing Address:** 4602 CENTRAL AVENUE ST PETERSBURG, FL 33711 FEI Number: 87-0775108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: HSU, YEN-WEN P MR LY, ERIKA K 130 72ND STREET NORTH 130 72ND STREET NORTH ST PETERSBURG, FL 33710 US ST PETERSBURG, FL 33710 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: YEN-WEN HSU 04/29/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LY, JACQUELINE T Name: Name: 130 72ND STREET NORTH Address: Address: City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: Title: Title: () Delete () Change () Addition Name: LY. THE THANH Name: 130 72ND STREET NORTH Address: Address: ST PETERSBURG, FL 33710 City-St-Zip: City-St-Zip: Title: Title: D () Delete () Change () Addition LY, ERIKA K Name: Name: 130 72ND STREET NORTH Address: Address: ST PETERSBURG, FL 33710 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition HSU, YEN-WEN P Name: Name: Address: 130 72ND STREET NORTH Address: City-St-Zip: ST PETERSBURG, FL 33710 City-St-Zip: Title: Title: () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ERIKA LY D 04/29/2008