2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: ∠

STONATURE AND TYPED OF PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

FILED Aug 27, 2007 8:00 am Secretary of State 04-13-2007 90162 020 ***150.00

11/2007 (305)467-4858 Devent Prone 8

DOCUMENT # P06000096158 1. Entity Name JVM BILLING SERVICES, INC.								04-13-20	007 90102	. 020	130.00
Principal Place of Business 2298 NW 208 WAY PEMBROKE PINES, FL 33029 US				oiling Address 298 NW 208 WAY EMBROKE PINES, FL	US		66021450				
2. Principal Place of Business - No P.O. Box #				Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.		03282007	Chg-P		1 (12/06)	•	
City & State				City & State		4. FEI Numbe	20-52	99099	/ 	plied For Applicable	
Zip	Country			Zip Coun		lry		of Status Desired	۽ ب	8.75 Addi	
	6. Name	and Address of Cu	rrent Regis	tered Agent			7. Name and	Address of New R	legistered A	jerit	
MORA, JOSE V 2298 NW 208 WAY PEMBROKE PINES, FL 33029						Name Street Address (P.O. Box Number is Not Acceptable)					
		,									
						City			FL	Zip Code	
	ions of regist	leted agent.		ourpose of changing its			<u></u>	th, in the State of Flo		miliar with,	and accept
	Signature, typed	t of printed name of registers	a agent and title	Kapphcable. (NO)	E Podestere	d Agent signature requir	red when revisiating)		DATE		
		FEE IS \$150.0 7 Fee will be \$		9. Election Campa Trust Fund Con			5.00 May Be dided to Fees				
10.	· · · · ·	OFFICERS	AND DIREC	CTORS		ADDITIONS,	CHANGES TO OFF	ICERS AND	DIRECTORS	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP		OSE V 208 WAY KE PINES, FL 33	029	□ Ocicle	•					Change	Addition
THTLE NAME STREET ADDRESS	2298 NW	OSEPH G 208 WAY		☐ Delete		EET ADDRESS				Change	Addit.on
CRY-ST-ZIP TITLE NAME	TREA MORA, N	OKE PINES, FL 33	3029	☐ Delete	TITL	Æ	<u></u>	······································		Change	Addition
STREET ADDRESS		208 WAY KE PINES, FL-33	in29———		1	EET ADDRESS			_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT MORA, J 2298 NW			Dolete		-				Change	Addition
TITLE NAME STREET ADDRESS CHY-ST-ZIP				□ Delete	1	j.				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Ociale	CIT	ME LEET ADDRESS Y+ST-ZIP				Change	Addition
12. I hereby indicated of the co-	certify that the control on this reportion or in the control or in the control on	ne information supplied of or supplemental retriever or truste tachment with an add	ed with this eport is true e empowers dress, with a	filing does not qualify and accurate and that d to execute this report to their like empowers	for the ex my signa rt as requ d.	kemptions contain ature shall have the aired by Chapter 6	ned in Chapter 11 ne same løgal effe 607, Florida Statut	9. Florida Statutes. ct as if made under es; and that my nar	I further cent oath; that I a ne appears in	fy that the in m an officer Block 10 o	nformation or director r Block 11 if

ATTACHMENT

166021450 # POG 0000 96158

August 17, 2007

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Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

To whom it may concern:

This letter is to inform you that in my phone conversation with one of your Document Specialists, Mr..Gary Blankenbaker, by the way, a very nice and professional person, he informed me of the correction letter dated April 19, 2007. I told him, that I had never received this letter and that I had no knowledge of a late fee pursuant to this communication. For this reason I am requesting that my late fee be waived do to my lack of knowledge, or lack of information. My document is: P06000096158. Attached you will find a copy of the corrected report. The reason for my delay with this communication is that I had to request my FEI number which is#20-5299099

Jose V. Mora