

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000065875

Entity Name: DV&V CORP

**FILED**  
**Apr 15, 2013**  
**Secretary of State**

## **Current Principal Place of Business:**

2121 PONCE DE LEON BLVD  
SUITE 1050  
CORAL GABLES, FL 33134 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

2121 PONCE DE LEON BLVD  
SUITE 1050  
CORAL GABLES, FL 33134 US

## **New Mailing Address:**

FEI Number: 27-0675419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

CONSULTING SERVICES OF SOUTH FLORIDA, INC.  
2121 PONCE DE LEON BLVD  
SUITE 1050  
CORAL GABLES, FL 33134 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: ANTONIO GARCIA

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: DE STEFANO VIVENZIO, VITORIO  
Address: 2121 PONCE DE LEON BLVD SUITE 1050  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: SD  
Name: VITORIO DE STEFANO, CARMELO  
Address: 2121 PONCE DE LEON BLVD SUITE 1050  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP  
Name: ROJAS DE STEFANO, DEYANIRA  
Address: 2121 PONCE DE LEON BLVD SUITE 1050  
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby 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 all other like empowered.

SIGNATURE: VITORIO DE STEFANO

PD

04/15/2013

Electronic Signature of Signing Officer or Director

Date