

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2008 08:00 A
Secretary of State

DOCUMENT # P94000005243

1. Entity Name
DVS INTERNATIONAL, INC.



Principal Place of Business
7700 NW 79 PLACE
UNIT D-2
MIAMI, FL 33166 US

Mailing Address
7700 NW 79 PLACE
UNIT D-2
MIAMI, FL 33166 US



01232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0466563

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SODERBERG, DORA V
7700 NW 79 PLACE
UNIT D-2
MEDLEY, FL 33166

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME SODERBERG, DORA V
STREET ADDRESS 7700 NW 79 PLACE, SUITE D-2
CITY-ST-ZIP MEDLEY, FL 33166

TITLE S
NAME ESPINOLA, MAYRA
STREET ADDRESS 7700 NW 79 PLACE, UNIT D-2
CITY-ST-ZIP MEDLEY, FL 33166

TITLE VP
NAME ESPINOLA, VICTOR
STREET ADDRESS 7700 NW 79 PLACE STE D-2
CITY-ST-ZIP MIAMI, FL 33166

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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03/27/08-80054-013 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dora V Soderberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/11/08 305-593-1696