# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 09, 2007**
**Secretary of State**

DOCUMENT# P94000020530

**Entity Name:** P I V, INC.

**Current Principal Place of Business:**

1000 SOUTH PINE ISLAND RD. SUITE 800
PLANTATION, FL 33324 US

**New Principal Place of Business:**

**Current Mailing Address:**

1000 SOUTH PINE ISLAND RD. SUITE 800
PLANTATION, FL 33324 US

**New Mailing Address:**

**FEI Number: 65-0483531** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CORPORATION SERVICE CO.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PD ( ) Delete
Name: ALLISON, JOHN R
Address: 1000 S PINE ISLAND ROAD #800
City-St-Zip: PLANTATION, FL 33324

Title: VP ( ) Delete
Name: KARAWAN, HOWARD C.
Address: 1000 S PINE ISLAND ROAD #800
City-St-Zip: PLANTATION, FL 33324

Title: S ( ) Delete
Name: MURTHA, WILLIAM
Address: 2106 NEW ROAD C7
City-St-Zip: LINWOOD, NJ 08221

Title: VP ( ) Delete
Name: HOWLAND, CYNTHIA
Address: 1000 S. PINE ISLAND RD., STE 800
City-St-Zip: PLANTATION, FL 33324

Title: VP ( ) Delete
Name: LEVINE, RICHARD M
Address: 730 FIFTH AVE, 5TH FLOOR
City-St-Zip: NEW YORK, NY 10019

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 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: JOHN ALLISON PD 01/09/2007

Electronic Signature of Signing Officer or Director Date