

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000072145

Entity Name: H.L.V., INC.

FILED  
Apr 15, 2006  
Secretary of State

## Current Principal Place of Business:

19460 N.W. 10TH STREET.  
PEMBROKE PINES, FL 33029 US

## New Principal Place of Business:

## Current Mailing Address:

18459 PINES BLVD.  
115  
PEMBROKE PINES, FL 33029 US

## New Mailing Address:

FEI Number: 65-0615174      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VOLLOVICK, RICHARD  
10207 SUNRISE LAKES BLVD.  
SUNRISE, FL 33322 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: P ( ) Delete  
Name: VOLLOVICK, HOWARD  
Address: 18459 PINES BLVD. SUITE 115  
City-St-Zip: PEMBROKE PINES, FL

Title: VP ( ) Delete  
Name: VOLLOVICK, RICHARD  
Address: 18459 PINES BLVD., SUITE 115  
City-St-Zip: PEMBROKE PINES, FL

Title: S ( ) Delete  
Name: VOLLOVICK, LINDA  
Address: 18459 PINES BLVD., SUITE 115  
City-St-Zip: PEMBROKE PINES, FL

## 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:

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: RICHARD VOLLOVICK

VP

04/15/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date