2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000010444

FILED Apr 26, 2007 Secretary of State

Entity Name: NRV ENTERPRISES, INC. **Current Principal Place of Business: New Principal Place of Business:** 203 US HIGHWAY 27 SOUTH LAKE PLACID, FL 338527904 US **Current Mailing Address: New Mailing Address:** 203 US HIGHWAY 27 SOUTH LAKE PLACID, FL 338527904 US FEI Number: 65-0639912 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ASUMBRADO, ROY G PRESIDE 203 US HIGHWAY 27 SOUTH LAKE PLACID, FL 338527904 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition

ASUMBRADO, ROY G PRESIDE ASUMBRADO, ROY G PRESIDE Name: Name: 203 US HWY. 27 SOUTH 203 US HWY. 27 SOUTH Address: Address: City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852 US Title: Title: () Delete (X) Change () Addition VILLAMOR, NOSTER R SECRETA Name: Name: VILLAMOR, NOSTER R VICE-PR 203 US HWY. 27 SOUTH 203 US HWY. 27 SOUTH Address: Address: LAKE PLACID, FL 33852 LAKE PLACID, FL 33852 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition AGANON, LOVENA S SEC-TRE Name: Name: 203 US HWY, 27 SOUTH Address: Address: City-St-Zip: City-St-Zip: LAKE PLACID, FL 33852 US

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: ROY ASUMBRADO **PRES** 04/26/2007