


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90132 020 ***150.00

DOCUMENT # P96000086388 1. Entity Name F.V.I. INVESTIGATIONS & RECOVERY, INC.																																																																																																																																																					
Principal Place of Business 13650 2ND AVE NE BRADENTON, FL 34212			Mailing Address 13650 2ND AVE NE BRADENTON, FL 34212																																																																																																																																																		
2. Principal Place of Business - No P.O. Box # AS ABOVE		3. Mailing Address 1135 PASADENA AVE S																																																																																																																																																			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 208		03162007 Chg-P CR2E034 (12/06)																																																																																																																																																	
City & State 		City & State ST PETERSBURG FL		4. FEI Number 65-0699569																																																																																																																																																	
Zip 		Country 		Applied For Not Applicable																																																																																																																																																	
Zip 33707		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																																	
6. Name and Address of Current Registered Agent BREADING, GUY N 13650 2ND AVE NE BRADENTON, FL 34212				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																																																	
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: <u><i>[Signature]</i></u> GUY NIGEL BREADING 03-16-07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input checked="" type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>P VANNACCI, FRANCO M.</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>14007 WATERLINE RD. 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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: <u><i>[Signature]</i></u> GUY NIGEL BREADING 03-16-07 1947482205 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																					