

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000043883

FILED
May 01, 2006
Secretary of State

Entity Name: DVTS, INC.

Current Principal Place of Business:

8250 NW 25 ST
SUITE 3
MIAMI, FL 331221505 US

New Principal Place of Business:

Current Mailing Address:

8250 NW 25 ST
SUITE 3
MIAMI, FL 331221505 US

New Mailing Address:

FEI Number: 65-0837618 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIECI, MARCO A MGR
7075 NW 116TH CT
DORAL, FL 331785531 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: DIECI, MARCO A MGR
Address: 7075 NW 116TH CT
City-St-Zip: DORAL, FL 331785531 US

Title: S () Delete
Name: ROJAS, GUILLERMO MGR
Address: 5220 S STERLING CIRCLE
City-St-Zip: STUART, FL 34997

Title: T (X) Delete
Name: MAGO, ROSAFRANCIA MGR
Address: 7075 NW 116TH CT
City-St-Zip: DORAL, FL 331785531 US

Title: D () Delete
Name: ARANGU, LUIS E MGR
Address: URB. GUAPARO, AV. 103 C/CALLE 160, #159-81
City-St-Zip: VALENCIA-VENEZUELA, CA VE

Title: D () Delete
Name: ROJAS, MARINA MGR
Address: URB. LOS NARANJOS, CALLE RES SENECA APT 3C
City-St-Zip: VALENCIA-VENEZUELA, CA VE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: MAGO, ROSAFRANCIA MGR
Address: 7075 NW 116TH CT
City-St-Zip: DORAL, FL 331785531 US

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

Title: T (X) Change () Addition
Name: ARANGU, LUIS E MGR
Address: URB. GUAPARO, AV. 103 C/CALLE 160, #159-81
City-St-Zip: VALENCIA-VENEZUELA, CA VE

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: MARCO A DIECI

PTD

05/01/2006

Electronic Signature of Signing Officer or Director

_____ Date