

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2005 08:00 AM
Secretary of State



DOCUMENT # P98000047531

1. Entity Name
A.V. SERVICES INTERNATIONAL CORP.

Principal Place of Business
3292 STIRLING RD
HOLLYWOOD, FL 33021 US

Mailing Address
3292 STIRLING RD
HOLLYWOOD, FL 33021 US



07042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FFI Number **65-0839397** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PIEDRA, AURELIO A
780 NW LE DEUNE RD #516
MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE

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

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: PSD
 NAME: VILAR, CARMEN
 STREET ADDRESS: 300 DIPLOMAT PKWY #409
 CITY-STATE-ZIP: HALLANDALE, FL 33009

TITLE: VD
 NAME: VILAR, RAUL E
 STREET ADDRESS: 300 DIPLOMAT PKWY #409
 CITY-STATE-ZIP: HALLANDALE, FL 33009

TITLE: TD
 NAME: VIIAR, ENRIQUE R
 STREET ADDRESS: 300 DIPLOMAT PKWY #409
 CITY-STATE-ZIP: HALLANDALE, FL 33009

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 CITY-STATE-ZIP:

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Carmen Vilar
 SIGNATURE AND TYPE-CERTIFIED NAME OF SIGNING OFFICER OR DIRECTOR
Carmen Vilar - President

7/1/05

954-966-9300
 Website Phone #