


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000032544
1. Entity Name
C. V. INTERNATIONAL, INC.



Principal Place of Business Mailing Address
**2000 SE 24TH AVE.
FT. LAUDERDALE, FL 33316** **2000 SE 24TH AVE.
FT. LAUDERDALE, FL 33316**

DO NOT WRITE IN THIS SPACE



07052006 No Chg-P CR2E034 (11/05)

4. FEI Number 13-3669048	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**VILLALVA, CARLOS
2000 SE 24TH AVE.
FT. LAUDERDALE, FL 33316**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2006**

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

U00000574046
08/10/06-80004-016 550.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VILLALVA, CARLOS 2000 SE 24TH AVE. FT. LAUDERDALE, FL 33316
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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:  08/07/06 954-467-0847
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #