## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042276

Entity Name: JVM ENTERPRISES, INC.

FILED Mar 05, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4106 WEST LAKE MARY BLVD 4106 WEST LAKE MARY BLVD.,

#224 SUITE 224,

LAKE MARY, FL 32746 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

4106 WEST LAKE MARY BLVD. 4106 WEST LAKE MARY BLVD.

#224 SUITE 224

LAKE MARY, FL 32746 LAKE MARY, FL 32746

FEI Number: 59-3577575 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEHTA, VIKRAM P
4106 WEST LAKE MARY BLVD #224
LAKE MARY, FL 32746 US

MEHTA, VIKRAM P
4106 WEST LAKE MARY BLVD.,
SUITE 224,

LAKE MARY, FL 32746 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: VIKRAM P. MEHTA 03/05/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR ( ) Delete Title: DR (X) Change ( ) Addition

Name: MEHTA, VIKRAM P Name: MEHTA, VIKRAM P
Address: 4106 WEST LAKE MARY BLVD #224 Address: 4106 WEST LAKE MARY BLVD., SUITE 224,

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

Title: MRS. ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MEHTA, JASBIR P
 Name:

 Address:
 2759, MARSH WREN CIRCLE,
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VIKRAM P. MEHTA DR. 03/05/2005