

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S51933

Entity Name: JARVICO, INC.

FILED  
Apr 26, 2005  
Secretary of State

**Current Principal Place of Business:**

2046 MCKINLEY STREET, #7  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

2046 MCKINLEY STREET, #7  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 65-0274068

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JARVIS, SUZANNE COSTAN  
6 MENDOTA LANE  
SEA RANCH LAKES, FL 33308 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: JARVIS, PETER C.,  
Address: 2046 MCKINLEY ST, BAY #7  
City-St-Zip: HOLLYWOOD, FL

Title: DVP ( ) Delete  
Name: JARVIS, SUZANNE  
Address: 6 MENDOTA LANE  
City-St-Zip: SEA RANCH LAKES, FL 33308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: PETER C. JARVIS

PRES

04/26/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date