

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V26026

FILED
Mar 03, 2009
Secretary of State

Entity Name: EL&V CORPORATION

Current Principal Place of Business:

440 SAWGRASS CORPORATE PARKWAY
SUITE 108
SUNRISE, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

440 SAWGRASS CORPORATE PARKWAY
SUITE 108
SUNRISE, FL 33325 US

New Mailing Address:

FEI Number: 65-0323561 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED TEAM GROUP
2625 EXECUTIVE PARK DR #5
WESTON, FL 33331 US

Name and Address of New Registered Agent:

UNITED TEAM GROUP
440 SAWGRASS CORPORATE PARKWAY, SUITE 108
SUNRISE, FL 33325 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: EUGENIO LASCURAIN 03/03/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LASCURAIN, EUGENIO
Address: 2625 EXECUTIVE PARK DR #5
City-St-Zip: WESTON, FL 33331

Title: DV () Delete
Name: LASCURAIN, JOAQUIN
Address: 2625 EXECUTIVE PARK DR #5
City-St-Zip: WESTON, FL 33331

Title: DV () Delete
Name: LASCURAIN, CARLOS
Address: 2625 EXECUTIVE PARK DR #5
City-St-Zip: WESTON, FL 33331

Title: DV () Delete
Name: LASCURAIN, BLANCA
Address: 2625 EXECUTIVE PARK DR #5
City-St-Zip: WESTON, L 33331

Title: DV () Delete
Name: LASCURAIN, JOSE
Address: 2625 EXECUTIVE PARK DR #5
City-St-Zip: WESTON, FL 33331

Title: DVS () Delete
Name: LASCURAIN, MARIA
Address: 2625 EXECUTIVE PARK DR #5
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: EUGENIO LASCURAIN DP 03/03/2009

Electronic Signature of Signing Officer or Director Date