


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # P00000115719**  
 1. Entity Name  
**ANOVA BUSINESS CENTERS, INC.**



Principal Place of Business      Mailing Address  
 2900 UNIVERSITY DR              2900 UNIVERSITY DR  
 CORAL SPRINGS, FL 33065      CORAL SPRINGS, FL 33065

**DO NOT WRITE IN THIS SPACE**



02282008      No Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For  
**65-1119882**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**RAHAEL, GISELE**  
 2900 UNIVERSITY DR  
 CORAL SPRINGS, FL 33065

**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 \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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


10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RAHAEL, GISELE
STREET ADDRESS	2900 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	VS
NAME	RAHAEL, PAULINE
STREET ADDRESS	2900 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	V
NAME	RAHAEL, MICHAEL
STREET ADDRESS	2900 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000310375  
 05/08/08-90107-016 158.75

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:**       Gisele Rahael, President      4/11/08      954-753-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #