2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 26, 2005
Secretary of State

DOCUMENT# P04000142969

Entity Name: NIVAL INTERACTIVE, INC.

Current Principal Place of Business:

550 WEST CYPRESS CREEK ROAD
SUITE 430
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

550 WEST CYPRESS CREEK ROAD
SUITE 430
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 20-1865604 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOLFE, CURTIS A
550 WEST CYPRESS CREEK ROAD
SUITE 120
FT. LAUDERDALE, FL 33309 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

OFFICERS AND DIRECTORS:

Title: COO ( ) Delete
Name: PASTUSHKIN, TIMOTHY
Address: 550 WEST CYPRESS CREEK ROAD, SUITE 430
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D ( ) Delete
Name: ORLOVSKIY, SERGEY
Address: 550 WEST CYPRESS CREEK ROAD, SUITE 430
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: VP/S ( ) Delete
Name: WOLFE, CURTIS A
Address: 550 WEST CYPRESS CREEK ROAD, SUITE 430
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: D ( ) Change (X) Addition
Name: ZOI, MIKE
Address: 550 WEST CYPRESS CREEK ROAD, SUITE 120
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D ( ) Change (X) Addition
Name: NOVAK, PETER
Address: 550 WEST CYPRESS CREEK ROAD, SUITE 120
City-St-Zip: FT. LAUDERDALE, FL 33309

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: CURTIS WOLFE S 09/26/2005

Electronic Signature of Signing Officer or Director — Date