

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90355 043 ***150.00

DOCUMENT # P04000142969

1. Entity Name
NIVAL INTERACTIVE, INC.



Principal Place of Business
**550 WEST CYPRESS CREEK ROAD
SUITE 430
FT. LAUDERDALE, FL 33309**

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04122006

Chg-P

CR2E034 (11/05)

4. FEI Number
20-1865604

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COO
PASTUSHKIN, TIMOTHY
550 WEST CYPRESS CREEK ROAD, SUITE 430
FT. LAUDERDALE, FL 33309** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
Bachus, Kevin
550 W. Cypress Creek Rd., Suite 430
Ft. Lauderdale, FL 33309** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ORLOVSKIY, SERGEY
550 WEST CYPRESS CREEK ROAD, SUITE 430
FT. LAUDERDALE, FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**President
ORLOVSKIY, SERGEY
550 W. Cypress Creek Rd., Suite 430
Ft. Lauderdale, FL 33309** ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP/S
WOLFE, CURTIS A
550 WEST CYPRESS CREEK ROAD, SUITE 430
FT. LAUDERDALE, FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**General Counsel/Secretary
Meredith Label-Angel
550 W. Cypress Creek Rd., Suite 430
Ft. Lauderdale, FL 33309** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ZOI, MIKE
550 WEST CYPRESS CREEK ROAD, SUITE 120
FT. LAUDERDALE, FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
NOVAK, PETER
550 WEST CYPRESS CREEK ROAD, SUITE 120
FT. LAUDERDALE, FL 33309** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-202-4442