2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000142969

1. Entity Name
NIVAL INTERACTIVE, INC.

Principal Place of Business	Mailing Address
1835 EAST HALLANDALE BLVD. # 614 HALLANDALE, FL 33309	1835 EAST HALLANDALE BLVD. # 614 HALLANDALE, FL 33309

04282008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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

FINKELSHTEYN, YAKOV MR.
1835 EAST HALLANDALE BLVD.
614
HALLANDALE, FL 33309

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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, 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	MR.
NAME	ORLOVSKIY, SERGEY P/D
STREET ADDRESS	1835 EAST HALLANDALE BLVD., #614
CITY-ST-ZIP	EAST HALLANDALE, FL 33309
TITLE	MR
NAME	POLYANOVSKY, ANATOLY D
STREET ADDRESS	1835 EAST HALLANDALE BLVD., #614
CITY-ST-ZIP	HALLANDALE, FL 33309
TITLE	MS.
NAME	LOBEL-ANGEL, MEREDITH SEC/GC
STREET ADDRESS	ANGEL LAW 2601 OCEAN PARK BLVD., #205
CITY-ST-ZIP	SANTA MONICA, CA 90405
TITLE	MR.
NAME	ZUEV, ALEXEY T
STREET ADDRESS	1835 EAST HALLANDALE BLVD., #614
CITY-ST-ZIP	HALLANDALE, FL 33309
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/28/08-80008-007 150.00

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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: Y Finkelshteyn 4/28/08 954-655-7134
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #