

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S28561

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: PARVENU ENTERPRISES, INC.

**Current Principal Place of Business:**

8280 S. E. CAMELLIA DRIVE  
HOBE SOUND, FL 33455 US

**New Principal Place of Business:**

13060 S.E. FLAMINGO DRIVE  
HOBE SOUND, FL 33455 US

**Current Mailing Address:**

P.O. BOX 3186  
TEQUESTA, FL 33469 US

**New Mailing Address:**

FEI Number: 65-0308453      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ARCHER, TODD C  
8280 S. E. CAMELLIA DRIVE  
HOBE SOUND, FL 33455 US

**Name and Address of New Registered Agent:**

ARCHER, TODD C  
13060 S. E. FLAMINGO DRIVE  
HOBE SOUND, FL 33455 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: \_\_\_\_\_ 04/29/2008  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: ARCHER, TODD  
Address: 8280 S. E. CAMELLIA DR.  
City-St-Zip: HOBE SOUND, FL

Title: DVS ( ) Delete  
Name: ARCHER, TODD  
Address: 8280 S. E. CAMELLIA DR.  
City-St-Zip: HOBE SOUND, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPT (X) Change ( ) Addition  
Name: ARCHER, TODD C  
Address: 13060 S.E. FLAMINGO DRIVE  
City-St-Zip: HOBE SOUND, FL 33455

Title: DVS (X) Change ( ) Addition  
Name: ARCHER, TODD C  
Address: 13060 S.E. FLAMINGO DRIVE  
City-St-Zip: HOBE SOUND, FL 33455

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: TODD C. ARCHER      DPT      04/29/2008  
Electronic Signature of Signing Officer or Director      Date