

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001515

Entity Name: NOVUS INSURANCE TAGS & TITLE AGENCY INC.

Current Principal Place of Business:

809 W SAMPLE RD
DEERFIELD BEACH, FL 33064

Current Mailing Address:

809 W SAMPLE RD
DEERFIELD BEACH, FL 33064

FEI Number: 65-1078708

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSUNCAO, ADELIO
809 W SAMPLE RD
DEERFIELD BEACH, FL 33064 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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PVST
Name ASSUNCAO, ADELIO
Address 8586 DYNASTY DRIVE
City-State-Zip: BOCA RATON FL 33433

I hereby 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 all other like empowered.

SIGNATURE: ADELIO ASSUNCAO

PRESIDENT

01/19/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date