

**2020 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 DE 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 DE ASSUNCAO

**PRESIDENT**

**06/18/2020**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date