

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000104205

**Entity Name:** NOVOTRANS, INC.**Current Principal Place of Business:**6891 COOLIDGE ST  
HOLLYWOOD, FL 33024**Current Mailing Address:**6891 COOLIDGE ST  
HOLLYWOOD, FL 33024**FEI Number:** 30-0515671**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RUIZ, NANCY  
6891 COOLIDGE ST  
HOLLYWOOD, FL 33024 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	PD
Name	RUIZ, NANCY
Address	6891 COOLIDGE ST
City-State-Zip:	HOLLYWOOD FL 33024

Title	VPD
Name	RUIZ, VIRGINIA
Address	6891 COOLIDGE ST
City-State-Zip:	HOLLYWOOD FL 33024

Title	TD
Name	RUIZ, ROSA
Address	6891 COOLIDGE ST
City-State-Zip:	HOLLYWOOD FL 33024

Title	D
Name	PICHARDO, MIGUEL
Address	6891 COOLIDGE ST
City-State-Zip:	HOLLYWOOD FL 33024

Title	SD
Name	ROBERT, PAULINA
Address	6891 COOLIDGE ST
City-State-Zip:	HOLLYWOOD FL 33024

*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:** NANCY RUIZ

GERENTE

02/09/2018

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