

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000086039

**Entity Name:** NU IMAGE MANAGEMENT, INC.

**Current Principal Place of Business:**

17201 COLLINS AVENUE  
3907  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

17201 COLLINS AVENUE  
3907  
SUNNY ISLES, FL 33160 US

**FEI Number:** 45-3481269

**Certificate of Status Desired:** No

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

GLEIZER, RONNETTE L  
19195 MYSTIC POINTE DRIVE  
807  
AVENTURA, FL 33180 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            P  
Name            LITMAN, JOHN  
Address        17201 COLLINS AVENUE #3907  
City-State-Zip: SUNNY ISLES FL 33160

Title            VP  
Name            GLEIZER, ELLA  
Address        17201 COLLINS AVENUE #3907  
City-State-Zip: SUNNY ISLES FL 33160

*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:** JOHN LITMAN

**PRESIDENT**

**04/23/2018**

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

\_\_\_\_\_  
Date