## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 08:00 AM
Secretary of State

DOCUMENT # 309623
1. Entity Name
NOVELTEX MIAMI INC

Principal Place of Business

151 EAST TENTH AVENUE HIALEAH, FL 33010

Mailing Address

151 EAST TENTH AVENUE HIALEAH, FL 33010



## DO NOT WRITE IN THIS SPACE

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01202007	No Chg-P	CR2E034 (11/05)		
4. FFI Number			Applied For	

4. FEI Number Applied For S9-1153724 Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARATOS,DIMIS A 151 EAST TENTH AVENUE HIALEAH, FL 33010

**SIGNATURE** 

## DO NOT WRITE IN THIS SPACE

			IN THIS SPACE				
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  DATE							
	E NOWIII FEE IS \$150.00 By 1, 2007 Fee will be \$550.00	Election Campaign Financing     Trust Fund Contribution.	· 🗆	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARATOS, DIMIS A. 3257 RIVIERA DR CORAL GABLES, FL				112222222		
TITLE NAME STREET ADORESS CITY-ST-ZIP	S MARATOS, PANGIOTA D. 3257 RIVIERA DR. CORAL GABLES, FL				000000722685 05/02/07-80043-001 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, Eloida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							