


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # H77637</b>	
1. Entity Name NOVA BOOKS, INC.	

Principal Place of Business 3040 SW 116TH AVE. FORT LAUDERDALE, FL 33330-1415 US	Mailing Address PO BOX 290670 FORT LAUDERDALE, FL 33329-0670 US
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**DO NOT WRITE IN THIS SPACE**



04192008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2590092	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

KRAMER & ZUCKERMAN, P.A.  
4000 HOLLYWOOD BOULEVARD  
SUITE 485 SOUTH  
HOLLYWOOD, FL 33021

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000915648 05/09/08-80023-009 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARRO, ANTHONY 3040 SW 116TH AVE FORT LAUDERDALE, FL 33330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GARRO, JOYCE A 3040 SW 116 AVE DAVIE, FL 33330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARRO, ANTHONY 3040 SW 116TH AVE DAVIE, FL 33330
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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, Florida 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.

SIGNATURE Anthony Garro PRES. 4/19/08 934 476 2710

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #