

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H93020

Entity Name: ATUVI, INC.

FILED
Mar 18, 2008
Secretary of State

Current Principal Place of Business:

7979 NW 21ST ST.
DIVIMARK SJO 1646
DORAL, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 025331
DIVIMARK SJO 1646
MIAMI, FL 33102 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCE, JOSE C
7979 NW 21ST ST.
DEPT. 815 SJO
DORAL, FL 33122 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: PHELPS, WILLIAM J
Address: 1539 HARRISON
City-St-Zip: HOLLYWOOD, FL

Title: V () Delete
Name: PERALTA, MANUEL E
Address: APARTADO 2727
City-St-Zip: SAN JOSE, COSTA RICA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: PHELPS, WILLIAM J
Address: 2529 PALLISTER
City-St-Zip: HIGHLAND, MI 48357 US

Title: VP (X) Change () Addition
Name: PERALTA, MANUEL E
Address: 7979 NW 21ST ST. DIVIMARK SJO 1646
City-St-Zip: DORAL, FL 33122 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MEPERALTA

VP

03/18/2008

Electronic Signature of Signing Officer or Director

Date