


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 APR 29 AM 9:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **02-03**
1. Entity Name
**FD10000087847
ERA-NOVUM CORPORATION, INC.**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
10820 CAMERON CT
Suite, Apt. #, etc.
SUITE 306
City & State
DAVIE, FL

3. Mailing Address
10820 CAMERON CT
Suite, Apt. #, etc.
SUITE 306
City & State
DAVIE, FL

200017312472
04/29/03--01061--027 **300.00

DO NOT WRITE IN THIS SPACE

Zip **33324** Country **USA**

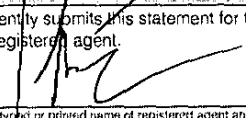
4. FEI Number
65-1136326
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
RUBY RIVERO ALVAREZ
Street Address (P.O. Box Number is Not Acceptable)
10820 CAMERON CT #306
City **DAVIE, FL** Zip Code **33324**

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  DATE **4/22/2003**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUBY RIVERO ALVAREZ 10820 CAMERON CT #306 DAVIE, FL 33324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DAVID LOZADA 10820 CAMERON CT #306 DAVIE, FL 33324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALVARO LOZADA 10820 CAMERON CT #306 DAVIE, FL 33324	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **4/22/2003** DAYTIME PHONE # **954-236-3765**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

21 4/30

MIAMI



CARACAS

April 22, 2003

Florida Department of State
Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Dear Sir/Madam:

Please be informed that the Law Office of Rawny Garay, P.A. has been retained by Era Novum Corporation, Inc., in order to reinstate this for profit corporation. There have been changes to the UBR as reflected in the enclosed fully executed report. Apparently the individual claiming to be an attorney, who received the annual report failed to inform my client of the filing requirements and further did not produce the UBR upon my client's request. We ask that you please waive the late fees since my client was misled by their accountant.

Enclosed please find a check in the amount of \$300.00 reflecting the renewal fee and the past renewal fee as well as an executed UBR. Should you have any questions please feel to contact the undersigned.

With nothing further at this time, I remain,

Sincerely,

LAW OFFICES OF RAWNY GARAY, P.A.

A handwritten signature in black ink, appearing to read 'Rawny Garay', is written over a horizontal line.

Rawny Garay, Esq.