2007 FOR PROFIT CORPORATION ANNUAL REPORT

May 02, 2007 8:00 am Secretary of State **DOCUMENT # P01000110039** 05-02-2007 90049 049 ***150.00 1. Entity Name VENUS, INC. Principal Place of Business Mailing Address 400014--13550 NW 6TH DRIVE 13550 NW 6TH DRIVE PLANTATION, FL 33325 PLANTATION, FL 33325 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04212007 Cha-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 65-1152824 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired ■6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PARISSOS, KONSTANTINOS Street Address (P.O. Box Number is Not Acceptable) **13550 NW 6TH DRIVE** PLANTATION, FL 33325 City Zip Code 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE. Signosire, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agen) signature required when remistation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TOLE ☐ Detete HILE Change Addition PARISSOS, KONSTANTINOS NAME NAME STREE | ADDRESS 13550 NW 6TH DRIVE STREET ADDRESS PLANTATION, FL 33325 CITY-ST-ZF DIY-SI- AP TITLE ☐ Detete THLE NAME NAME STREET AUDITESS STREET AIRBEST CITY-ST-ZF CITY-SI-ZIP Delete ☐ Addition MAME VALUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE HILE ☐ Detecte ☐ Change Addition NAME MANE STREET AUDIRESS STREET ADDRESS CITY-ST-ZP CHY-SI-AP Change IFILE Delete TITLE ■ Addition MASAF MARK STREET ADDRESS STREET AUDRESS CITY-ST-ZIP CITY-SI-ZIP THLE ☐ Delete TITLE ☐ Change Addition NAME WARE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHIY-SI- ZIP 12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119. Floride 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 eath; that I am an officer or director of the corporation or the receiver or mistee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in changed, or on an attachment with an appears, with all other tike empowered. SIGNATURE!

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