

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000111683

Entity Name: NUSPACE, INC

FILED  
Apr 22, 2008  
Secretary of State

## Current Principal Place of Business:

12020 N.E. 5TH AVENUE  
BISCAYNE PARK, FL 33161

## Current Mailing Address:

12020 N.E. 5TH AVENUE  
BISCAYNE PARK, FL 33161

## New Principal Place of Business:

17100 COLLINS AVE  
SUITE 212  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

17100 COLLINS AVE  
SUITE 212  
SUNNY ISLES BEACH, FL 33160

FEI Number: 65-1156357

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUMIANO, MARIO  
12020 N.E. 5TH AVENUE  
BISCAYNE PARK, FL 33161 US

## Name and Address of New Registered Agent:

RUMIANO, MARIO  
17100 COLLINS AVE  
SUITE 212  
SUNNY ISLES BEACH, FL 33160 US

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: MARIO RUMIANO

04/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: RUMIANO, MARIO L  
Address: 12020 NE 5TH AVENUE  
City-St-Zip: BISCAYNE PARK, FL 33161

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PART (X) Change ( ) Addition  
Name: RUMIANO, MARIO L  
Address: 17100 COLLINS AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: PART ( ) Change (X) Addition  
Name: JORGE, ORTIGOSA  
Address: 17100 COLLINS AVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: JORGE ORTIGOSA

PART

04/22/2008

Electronic Signature of Signing Officer or Director

Date