

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032586

FILED  
Feb 23, 2009  
Secretary of State

Entity Name: NOSSO BRASIL, INC.

**Current Principal Place of Business:**

950 S POWERLINE RD  
DEERFIELD BEACH, FL 33442 US

**New Principal Place of Business:**

642 SIESTA KEY CIRCLE  
2811  
DEERFIELD BEACH, FL 33441 US

**Current Mailing Address:**

4641 N STATE ROAD 7  
18  
COCONUT CREEK, FL 33073 US

**New Mailing Address:**

FEI Number: 04-3653849      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

EAGLE TAX REPRESENTATION, CORP  
4641 N STATE ROAD 7  
18  
COCONUT CREEK, FL 33073 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: D ( ) Delete  
Name: ROCHA, MARCILIO  
Address: 950 S POWERLINE RD  
City-St-Zip: DEERFIELD BEACH, FL 33442 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: ROCHA, MARCILIO  
Address: 642 SIESTA KEY CIRCLE # 2811  
City-St-Zip: DEERFIELD BEACH, FL 33441 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: MARCILIO ROCHA

P

02/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date