2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other

SIGNATURE:

FILED Feb 09, 2005 08:00 AM **DOCUMENT # P02000066320 Secretary of State** SERVI-NOVA INTERNATIONAL INC. Principal Place of Business Mailing Address 1865 BRICKELL AVENUE 1865 BRICKELL AVENUE **BUILDING A 1414 BUILDING A 1414** MIAMI, FL 33129 MIAMI, FL 33129 02032005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 02-0622971 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent OYARZABAL, NANCY DO NOT WRITE 1865 BRICKELL AVENUE **BUILDING A 1414** IN THIS SPACE MIAMI, FL 33129 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 Signalure, typed or printed name of registered agent and tale it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE OYARZABAL, NANCY NAME STREET ADDRESS 1865 BRICKELL AVENUE, BLDG. A 1414 CITY-ST ZIP MIAMI, FL 33129 ___U000000221231 02/09/05-80021-022 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS City-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST ZIP NAME STREET ADDRESS 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 turther 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 of execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if

IGNING OFFICER OR DIRECTOR

Daytime Phone #