

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078259

FILED
Feb 23, 2007
Secretary of State

Entity Name: NUSPE CORP.

Current Principal Place of Business:

17600 COLLINS AVE
SUNNY ISLES, FL 33160

New Principal Place of Business:

126 S FEDERAL HIGHWAY
200
DANIA, FL 33004

Current Mailing Address:

17600 COLLINS AVE
SUNNY ISLES, FL 33160

New Mailing Address:

126 S FEDERAL HIGHWAY
DANIA, FL 33004

FEI Number: 55-0788133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAENZ, GEORGE CPA
45 SW 24 RD.
MIAMI, FL 33129 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: PD () Delete
Name: DE PEPE, DORA P
Address: 17600 COLLINS AVE
City-St-Zip: SUNNY ISLES, FL 33160

Title: VPD () Delete
Name: PEPE, DANIEL
Address: 17600 COLLINS AVE
City-St-Zip: SUNNY ISLES, FL 33160

Title: D () Delete
Name: PEPE, DANIEL A
Address: 17600 COLLINS AVE
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DE PEPE, DORA P
Address: 126 S FEDERAL HWY
City-St-Zip: DANIA, FL 33004

Title: VPD (X) Change () Addition
Name: PEPE, DANIEL
Address: 126 S FEDERAL HWY
City-St-Zip: DANIA, FL 33004

Title: D (X) Change () Addition
Name: PEPE, DANIEL A
Address: 126 S FEDERAL HWY
City-St-Zip: DANIA, FL 33004

I hereby certify that the information supplied with this filing does not qualify for the 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: DORA DE PEPE

P

02/23/2007

Electronic Signature of Signing Officer or Director

Date