2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000092421

2333 SW 34 TER

FT LAUDERDALE, FL 33312

Address:

City-St-Zip:

Entity Name: NEW VENTURES DEVELOPMENT, INC

FILED Jan 24, 2006 Secretary of State

y		VERVIORES BEVELSE INICIAL,					
Current P	rincipal Pla	ace of Business:	New Princ	New Principal Place of Business:			
2333 SW 3 FT LAUDE	34 TER ERDALE, FL	33312					
Current M	lailing Add	ress:	New Maili	New Mailing Address:			
2333 SW 3 FT LAUDE	34 TER ERDALE, FL	33312					
FEI Number	: 56-2394024	FEI Number Applied For()	FEI Number Not Appl	icable () C	Certificate of Status Desi	red ()	
Name and	l Address o	f Current Registered Agent:	Name and	Address of Nev	w Registered Agent	:	
2333 SW 3 FT LAUDE	RDALE, FL	33312 US					
	e named ent e of Florida.	ty submits this statement for the	e purpose of changing it	s registered offic	ce or registered agen	t, or both,	
SIGNATUR	RE:						
	Elect	ronic Signature of Registered A	gent		Date		
Election Car	mpaign Finan	cing Trust Fund Contribution ().					
OFFICER	S AND DIR	ECTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	2333 SW 3	() Delete EOHANE, CARRIE 4 TER DALE, FL 33312	Title: Name: Address: City-St-Zip:	() Cl	hange () Addition		
Title: Name: Address: City-St-Zip:	DS GIORDANO 2300 SW 3- FT LAUDER		Title: Name: Address: City-St-Zip:	DS (X) C KEOHANE, JERRY 2333 SW 34 TER FT LAUDERDALE,			
Title: Name: Address: City-St-Zip:	D GIORDANO 2300 SW 3- FT LAUDER		Title: Name: Address: City-St-Zip:	() Cl	hange () Addition		
Title: Name:	D KEOHANE.	(X) Delete JERRY R	Title: Name:	() CI	hange()Addition		

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.

Address:

City-St-Zip:

SIGNATURE: CARRIE L. KEOHANE DP 01/24/2006