

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000066441

FILED
Apr 04, 2008
Secretary of State

Entity Name: NU GROUT, INC.

Current Principal Place of Business:

216 SE 16TH ST
CAPE CORAL, FL 33990

New Principal Place of Business:

1505 SE 5TH CT
CAPE CORAL, FL 33990

Current Mailing Address:

216 SE 16TH ST
CAPE CORAL, FL 33990

New Mailing Address:

PO BOX 151866
CAPE CORAL, FL 33915

FEI Number: 20-1101249

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOUTHWEST PROFESSIONAL SERVICES OF S FL IN
13571 MCGREGOR BLVD #22
FORT MYERS, FL 33919 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: P () Delete
Name: BASORA, ILIA
Address: 216 SE 16TH ST
City-St-Zip: CAPE CORAL, FL 33990

Title: V () Delete
Name: MENA-BYERS, MARIBEL
Address: 124 SE 16TH ST
City-St-Zip: CAPE CORAL, FL 33990

Title: T () Delete
Name: MOVALLI, ILIA
Address: 1505 SE 5TH COURT
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BASORA, ILIA
Address: 1505 SE 5TH CT
City-St-Zip: CAPE CORAL, FL 33990

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ILIA BASORA

P

04/04/2008

Electronic Signature of Signing Officer or Director

Date