

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000143499

Entity Name: ENIUS, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

310 NE 18TH AVE
CAPE CORAL, FL 33909

New Principal Place of Business:

2524 SAWGRASS LAKE CT.
CAPE CORAL, FL 33909

Current Mailing Address:

310 NE 18TH AVE
CAPE CORAL, FL 33909

New Mailing Address:

2524 SAWGRASS LAKE CT.
CAPE CORAL, FL 33909

FEI Number: 20-2359831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOWAK, THOMAS
310 NE 18TH AVE
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

NOWAK, THOMAS
2524 SAWGRASS LAKE CT
CAPE CORAL, FL 33909 US

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: THOMAS NOWAK

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NOWAK, THOMAS
Address: 310 NE 18TH AVE
City-St-Zip: CAPE CORAL, FL 33909

Title: DV () Delete
Name: SCHALLER, HERBERT
Address: NEUWIEDER STR 15
City-St-Zip: NUREMBERG, GERMANY, 90411

Title: D () Delete
Name: NOWAK, SABINE
Address: 310 NE 18TH AVE
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NOWAK, THOMAS
Address: 25424 SAWGRASS LAKE CT
City-St-Zip: CAPE CORAL, FL 33909

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

Title: D (X) Change () Addition
Name: NOWAK, SABINE
Address: 2524 SAWGRASS LAKE CT
City-St-Zip: CAPE CORAL, FL 33909

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: THOMAS NOWAK

DP

04/15/2009

Electronic Signature of Signing Officer or Director

Date