

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144120

FILED
Sep 07, 2005
Secretary of State

Entity Name: SUPERNOVA SYSTEMS & NETWORKS, INC.

Current Principal Place of Business:

8891 SW 142ND AVE. #36
MIAMI, FL 33186

New Principal Place of Business:

5577 NW 200 ST
OPA LOCKA, FL 33055 US

Current Mailing Address:

8891 SW 142ND AVE. #36
MIAMI, FL 33186

New Mailing Address:

5577 NW 200 ST
OPA LOCKA, FL 33055 US

FEI Number: 39-2748469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALENCIA, PABLO
8891 SW 142ND AVE. #36
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

VALENCIA, PABLO
5577 NW 200 ST
OPA LOCKA, FL 33055 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:

09/07/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VALENCIA, PABLO
Address: 8891 SW 142ND AVE. #36
City-St-Zip: MIAMI, FL 33186

Title: VD () Delete
Name: DIAZ, DIANA C
Address: 8891 SW 142ND AVE. #36
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VALENCIA, PABLO
Address: 5577 NW 200 ST
City-St-Zip: OPA LOCKA, FL 33055

Title: VD (X) Change () Addition
Name: DIAZ, DIANA C
Address: 5577 NW 200 ST
City-St-Zip: OPA LOCKA, FL 33055

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PABLO VALENCIA

PD

09/07/2005

Electronic Signature of Signing Officer or Director

Date