

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000149530

Entity Name: NOVEAU MED SERVICES, INC.

FILED  
Jun 02, 2005  
Secretary of State

## Current Principal Place of Business:

782 NE LEJEUNE RD SUITE 447  
MIAMI, FL 33126

## New Principal Place of Business:

## Current Mailing Address:

782 NE LEJEUNE RD SUITE 447  
MIAMI, FL 33126

## New Mailing Address:

FEI Number: 20-1849989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARCIA-OLIVER & MAINIERI PA  
782 NE LEJEUNE RD SUITE 447  
MIAMI, FL 33126 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

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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Change (X) Addition  
Name: LLOYDS, JOHN J  
Address: 3115 S.W. 103TH AVE  
City-St-Zip: MIAMI, FL 33165

Title: TD ( ) Change (X) Addition  
Name: DOMINGUEZ, OSCAR J  
Address: 1925 BRICKELL AVENUE, APT. D-1506  
City-St-Zip: MIAMI, FL 33129

Title: S ( ) Change (X) Addition  
Name: COLLAZO, BLAS D  
Address: 1133 S.W. 23RD AVENUE  
City-St-Zip: MIAMI, FL 33135

Title: VP ( ) Change (X) Addition  
Name: HERNANDEZ, ENRIQUE  
Address: 10231 N.W. 129TH STREET  
City-St-Zip: MIAMI, FL 33018

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: JOHN J. LLOYDS

PD

06/02/2005

Electronic Signature of Signing Officer or Director

Date