

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000008981

Entity Name: NHU VENTURES, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

275 BAL BAY DRIVE
BAL HARBOUR, FL 33154

New Principal Place of Business:

3471 MAIN HIGHWAY
VILLA 412
MIAMI, FL 33133

Current Mailing Address:

275 BAL BAY DRIVE
BAL HARBOUR, FL 33154

New Mailing Address:

3471 MAIN HIGHWAY
VILLA 412
MIAMI, FL 33133

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAM, NHU T
275 BAL BAY DRIVE
BAL HARBOUR, FL 33154 US

Name and Address of New Registered Agent:

LAM, NHU T
3471 MAIN HIGHWAY
VILLA 412
MIAMI, FL 33133 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: NHU T LAM

05/01/2006

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: PST () Delete
Name: LAM, NHU T
Address: 275 BAL BAY DRIVE
City-St-Zip: BAL HARBOUR, FL 33154

Title: C () Delete
Name: AGOSTINE, DAVID W
Address: 275 BAL BAY DRIVE
City-St-Zip: BAL HARBOUR, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: LAM, NHU T
Address: 3471 MAIN HIGHWAY, VILLA 412
City-St-Zip: MIAMI, FL 33133

Title: CD (X) Change () Addition
Name: AGOSTINE, DAVID W
Address: 3471 MAIN HIGHWAY, VILLA 412
City-St-Zip: BAL HARBOUR, FL 33133

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.

SIGNATURE: DAVID W AGOSTINE

D

05/01/2006

Electronic Signature of Signing Officer or Director

Date