

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000012891

FILED
Jul 02, 2008
Secretary of State

Entity Name: CLUB VUE INCORPORATED

Current Principal Place of Business:

13230 SW 132 AVE, B12
MIAMI, FL 33186 US

New Principal Place of Business:

5688 INTERNATIONAL DRIVE
ORLANDO, FL 32819 US

Current Mailing Address:

4843 LAKES EDGE LANE
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 20-8410178 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KISHORE, KALOWATIE
4843 LAKES EDGE LANE
KISSIMMEE, FL 34744 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: P () Delete
Name: KISHORE, KALOWATIE
Address: 4843 LAKES EDGE LANE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: D () Delete
Name: KISHORE, ROHAN
Address: 4843 LAKES EDGE LANE
City-St-Zip: KISSIMMEE, FL 34744 US

Title: D () Delete
Name: KISHORE, RONNIE D
Address: 4843 LAKES EDGE LANE
City-St-Zip: KISSIMMEE, FL 34744 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KALOWATIE KISHORE

P

07/02/2008

Electronic Signature of Signing Officer or Director

_____ Date