

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000034380

Entity Name: NIV MOTORCYCLES, INC.

FILED
Aug 03, 2009
Secretary of State

Current Principal Place of Business:

50 MARABELLA AVE.
CORAL GABLES, FL 33134

New Principal Place of Business:

393 EAST 51ST STREET
HIALEAH, FL 33013 US

Current Mailing Address:

50 MARABELLA AVE.
CORAL GABLES, FL 33134

New Mailing Address:

3160 SW 8TH STREET
MIAMI, FL 33135 US

FEI Number: 32-0245750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRIARTE, HANNIA
175 FONTAINBLEAU BLVD., SUITE 1-B
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

IRIARTE, HANNIA
3160 SW 8TH STREET
MIAMI, FL 33135 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: HANNIA IRIARTE

08/03/2009

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: MOSQUERA, NIVALDO
Address: 50 MARABELLA AVE.
City-St-Zip: CORAL GABLES, FL 33134

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOSQUERA, NIVALDO
Address: 3160 SW 8TH STREET
City-St-Zip: MIAMI, FL 33135 US

Title: VP () Change (X) Addition
Name: BAZO, ELSA L
Address: 3160 SW 8TH STREET
City-St-Zip: MIAMI, FL 33135 US

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: NIVALDO MOSQUERA

PD

08/03/2009

Electronic Signature of Signing Officer or Director

Date