2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000077452

Entity Name: NMRV ENTERPRISES, INC.

FILED Sep 26, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17413 NW 175TH AVE 10304 WEST SR 235 ALACHUA, FL 32615 US ALACHUA, FL 32615 US

Current Mailing Address: New Mailing Address:

17413 NW 175TH AVE PO BOX 1346

ALACHUA, FL 32615 US ALACHUA, FL 32616 US

FEI Number: 94-3438052 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DALCHAND, SAKICHAND
17413 NW 175TH AVE
ALACHUA, FL 32615 US

DALCHAND, SAKICHAND
10304 WEST SR 235
ALACHUA, FL 32615 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: 09/26/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PVST

 Name:
 DALCHAND, SAKICHAND

 Address:
 10304 WEST SR 235

 City-St-Zip:
 ALACHUA, FL 32615 US

Title: [

Name: DALCHAND, SAKICHAND Address: 10304 WEST SR 235 City-St-Zip: ALACHUA, FL 32615 US

Title: D

 Name:
 DALCHAND, DHANMATTIE

 Address:
 10304 WEST SR 235

 City-St-Zip:
 ALACHUA, FL 32615 US

Title: [

Name: DALCHAND, NITAI PRANA Address: 10304 WEST SR 235 City-St-Zip: ALACHUA, FL 32615 US

Title: D

 Name:
 DALCHAND, MIRA DEVI

 Address:
 10304 WEST SR 235

 City-St-Zip:
 ALACHUA, FL 32615 US

I hereby 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 all other like empowered.

SIGNATURE: SAKICHAND DALCHAND D 09/26/2012