

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 14, 2005 8:00 am
Secretary of State

04-14-2005 90109 046 ***150.00

DOCUMENT # *P93000081479*

1. Entity Name

NEBU CORPORATION



DO NOT WRITE IN THIS SPACE

20033305

2. Principal Place of Business

12750 S.W. 4 TH. COURT

3. Mailing Address

12750 S.W. 4TH. COURT

Suite, Apt. #, etc.

#210

Suite, Apt. #, etc.

#210

City & State

PEMBROKE PINES FL.

City & State

PEMBROKE PINES FL.

Zip

33027

Country

U.S.A.

Zip

33027

Country

U.S.A.

4. FEI Number

05-0458891

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

NEBULONI, EDUARDO E.

Street Address (P.O. Box Number is Not Acceptable)

12750 S.W. 4TH. COURT #210

City

PEMBROKE PINES

FL

Zip Code

33027

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

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**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>PRESIDENT EDUARDO NEBULONI 12750 S.W. 4 COURT #210 PEMBROKE PINES FL. 33027</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>SVD SUSANA NEBULONI 12750 S.W. 4 COURT #210 PEMBROKE PINES FL. 33027</i>
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE

EdUARDO NEBULONI

EDUARDO NEBULONI PRESIDENT

4/7/05

305-542-6464

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)