FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL PEPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Modham Secretary of State

1006

DIVISION OF CORPORATIONS

DOCUM	1ENT # P950 0	00051335 (4))				
1. Corporation N	VU SERVICES, INC.	,					
Principal Place of Business		Maring Address					01106 71000 01103 HABI 0101 7001
1690 NE 145TH STREET		1690 NE 145TH STREET					
MIAMI FL 331		MIAMI FL 33181					
					3. Date Incorporated or Qualified 3a. Date of Last Report W/A		
2. Principal Plac	ce of Business	2a. Mailing Address			4, FEI Number		Applied For
21		[26]		65-0599247		Not Applicable \$8.75 Additional	
Suite, Apt. #, etc		Suite, Apt. #. etc.		5. Certificate of Status Desired		Fee Required	
City & State		Orty & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Z(p)	Countr	У	8. This corporation has liability for Florida Statutes	intangible:	tax under s. 199.032,
24	25 Name and Address of Curre	29 ant Registered Agent	30		10. Name and Address of New Registered Agent		
	RMO RODRIGUEZ & ASSOCIA FLAGLER STREET STE 403	TES	8:	2 Street Add	ress (P.O. Box Number is Not Accepta	ule)	
MIAMI FL 33134		83 84 Gity				85 Zip Code	
familiar witi	n, and accept the obligations of Schools	eta (inclusione) (c)	. 6g telA,	peration a tree	oration submits this statement for the purified of directors. Thereby accept the application for the purificulty of directors and formal submitted the ADDITIONS/CHANGES TO OF	DATE	
12.	r 	NO DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OF	I JOE HO A	Change Addition
TITLE		VAZQUEZ, ANA 1690 NE 145TH STREET MIAMI FL 33181		í			
STREET ADDRESS				ET ADORESS			
CITY-S1-ZIP				S1-ZIP			
TITLE		[] DELETE		!			Change Addition
NAME			2.2 NAM	•			
STREET ADDRESS				ET ADDRESS			
CiTY-ST-ZIP	☐ DEFFIE		3 1 111	-S' ZI ²			Change Addition
TITLE NAME			3.2 NAM				
STREET ADDRESS			33 SH	SEL ADDRESS			
CITY-ST-ZIP			3.4 0 11	\$1 - 700			
TIFLE	DELETE		4 1 1111	.t			Change Addition
NAME			4.2 NAN				
STREET ADDRESS				EFT ADDRESS			
CITY-ST-ZIP				<u>-S1 26</u>			Change Addition
TITLE		[1] DELETE	5 1 1 i I	1			
NAME				FE! ADDRESS			
STREET ADDRESS			1	r - S1 - Z1P			
CITY-S1-ZIP	DELETE		6 1 711				Change Addition

6.4 CH ₹ - ST - ZIP 14. If do hereby certify that the information supplied with this fitting in Voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated or this guidal report of supplemental annual report is true and ancurate and that my signature shall have the same legal effect as if made under certify that I am an officer or decider of the proportion of the coexer or trustee empowered to exhault his report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if place pure, or on a supplement with an address.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

305-949-3210

CR2E034 (12/95)