

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000022385

1. Entity Name

THE NV GROUP, INC.

FILED

Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90109 041 ***150.00

Principal Place of Business

Mailing Address

~~10350 SW 106TH AVENUE~~

~~10350 SW 106TH AVENUE~~

~~#A~~

~~#A~~

MIAMI FL 33157

MIAMI FL 33157-7679

US

US

2. Principal Place of Business

3. Mailing Address

10590 SW 184 TERR

10590 SW 184 TERR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI - FL.

City & State

MIAMI - FL.

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

33157

US

Zip

Country

33157

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VILAOMAT, J F

10350 SW 106TH AVENUE

#A

MIAMI FL 33157

Name

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

10590 SW 184 TERR.

City

MIAMI

FL

Zip Code

33157

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.

SIGNATURE

J.F. Vilaomat J.F. VILAOMAT

3/8/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME VILALMOT, J F
STREET ADDRESS 10350 SW 106TH AVENUE #A
CITY-ST-ZIP MIAMI FL 33157

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

10590 SW 184 TERR
MIAMI - FL. 33157

☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

J.F. Vilaomat J.F. VILAOMAT PRES.

3/8/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #