FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

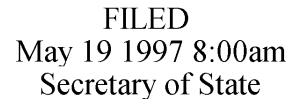
Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000081196 (3)

NU VENTURES INTERNATIONAL, INC.

Principal Place of Business

Mailing Address





DECIMAL BENCE	H FL 33483	1801 SOUTH FEDERAL DELRAY BEACH FL 334	183-3334					
						3. Date Incorporated or Qualified 10/01/1996	3a. Date of	Last Report
2. Principal Place of Business		28. Mailing Address	 -			4. FEI Number	1 /	Applied For
		Suite, Apt. #, etc.				65-07087		Not Applicab
22	", 0,0	27				5. Certificate of Status Desired	1 1 7 -	3.75 Additional Fee Regulred
City & State	9	City & State		-		6. Election Campaign Financing		5.00 May Be
23		28				Trust Fund Contribution		Added to Fees
Zip	Country	Zip		intry		8. This corporation has liability for		
24]	9. Name and Address of Curre	[29]	30	T			Yes No	
- I TOP	MBLAY, W J	ent Registered Agent		81 Nar) A	10. Name and Address of New Re		<u> </u>
1801		81 Nanya 1 82 Street Add		dress (P.O. Box Number is Not Acceptable)				
				ess (P.O. Box Number is Not Acceptal	ole)			
UELI	RAY BEACH FL 33483			83				
				84 City			FL 85	Zip Code
11. Pursuant t	o the provisions of Sections 607.09	002 and 607.1508, Florida Sta	tutes, the a	LL bove-nam	ed corpo	oration submits this statement for the	 	laina its registere
Office of re	egistered agent, or both, in the Stal m familiar with, and accept the obli	ic of Fiorida. Such change wa	is authorize	a by the d	corporation	on's board of directors. I hereby acce	pt the appointm	onl as registered
SIGNATURE		5-11-10 or section too 1.0000,	, onde ora	onos.				
	Signature, typed or printed name of registered a			d Agent signa	turo roquire	d when re-nsta(ing)	DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND DIRE	
TITLE	D	L) DELETE	1.1 1	ILE	r	٠, ٥,	□ c	hange 💹 Additio
NAME	HAGGAR, MARGARET L		1.2 N	Mé				
STREET ADDRESS	350 SW 27TH AVENUE		1.3 S	REE I ADORE:	SS			
CITY-ST-ZIP TITLE	DELRAY BEACH FL 33495	DELETE		1Y-S1-20P	100	-1		
NAME	TREMBLAY, WILFRID J	☐ DELETE	2.1 1			7	LJC	hange 🔀 Additio
STREET ADDRESS	1901 BRINSON ROAD STE E	1.5	2.2 N		.			
CITY-ST-ZIP	LUTZ FL 33549	•		REET ADDRES ITY-ST-719	15			
TITLE		DELETE	3.1 TI		-			hange
NAME			3.2 N	ME				1100110
STREET ADDRESS			33\$1	HEET ADDRES	is l			
CITY-ST-ZIP			3 4. 0	ITY-ST-ZIP				
TITLE		DELETE	4.1 11	LF			C	hange 🔲 Additio
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 S1	REET ADDRES	ss			
CITY-ST-ZIP			4.4 CI	IY-S1-ZIP				
THTLE		☐ DELETE	5.1 Tr	LE			C	hange 🔲 Addilio
			5.2 N/	ME				
NAME			5.3.81	REET ADDRES	is			
NAME STREET ADDRESS			0.5 0.		1			
NAME STREET ADDRESS CITY-ST-ZIP		Dries	5.4 CI	1Y-S1-ZIP				····
NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	5.4 CI 6.1 TI	t F			c	hange Additio
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	5.4 CI 6.1 TI 6.2 N/	LF ME			C	hange Additio
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETÉ	5.4 CI 6.1 TI 6.2 N/ 6.3 SI	LF Me Ree1 addres	S		C	hange Additio
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. Led hereby	y certify that the information supplie	ed with this files does not aw	5.4 Cl 6.1 Tl 6.2 N/ 6.3 Sl 6.4 Cl	LE ME REE1 ADDRES LY+ST+ZIP	n clated	in Section 119.07(3)(i), Florida Statute ny signature shall havo the samo loga	n Lifuthor posti	L. that the