

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90889 026 ***150.00

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

DOCUMENT # P97000033492

1. Entity Name

NETVENTURE TECHNOLOGIES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1490 S. MILITARY TRAIL

3. Mailing Address

1490 S. MILITARY TRAIL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#13F

#13F

City & State

WEST PALM BEACH, FL

City & State

WEST PALM BEACH, FL

Zip

33415

Country

U.S.

Zip

33415

Country

U.S.

4. FEI Number

65-0746771

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

DEVRIES, JAMES R.

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

7070 PIONEER LAKES CIRCLE

City

WEST PALM BEACH

FL

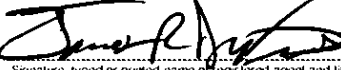
Zip Code

33413

**DO NOT WRITE
IN THIS SPACE**

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



REGISTERED AGENT

4/29/02

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
D,P
DEVRIES, JAMES R.
STREET ADDRESS
7070 PIONEER LAKES CIRCLE
CITY - ST - ZIP
WEST PALM BEACH, FL 33413

TITLE
NAME
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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 on an attachment with an address, with all other like empowered.

SIGNATURE



James R DeVries
PRESIDENT

4/29/02

(561) 689-0084

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CS2E0348 (12/01)