

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000013092

Entity Name: NETNIQUES CORPORATION

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6175 NW 167TH ST  
G-19  
MIAMI, FL 33015 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4457  
HIALEAH, FL 33014 US

**New Mailing Address:**

FEI Number: 65-0894177

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CARDOSO, MIGUEL O  
6175 NW 167 ST G-19  
MIAMI, FL 33015 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CARDOSO, MIGUEL O  
Address: 6175 NW 167TH ST #G-19  
City-St-Zip: MIAMI, FL 33015

Title: VP  
Name: CARDOSO, MANUEL  
Address: 6175 NW 167TH ST #G-19  
City-St-Zip: MIAMI, FL 33015

Title: S  
Name: CARDOSO, BLANCA  
Address: PO BOX 4457  
City-St-Zip: HIALEAH, FL 33014

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MIGUEL CARDOSO

P

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date