

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2002 8:00 am
Secretary of State

02-12-2002 90092 049 ***150.00

DOCUMENT # P99000031819

1. Entity Name
NOUVELLE IMAGE, INC.

Principal Place of Business
2300 GRIFFIN ROAD
LOT 54
FORT LAUDERDALE FL 33312

Mailing Address
2300 GRIFFIN ROAD
LOT 54
FORT LAUDERDALE FL 33312



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
269 S.W. 7th Street
 Suite, Apt. #, etc.

3. Mailing Address
269 S.W. 7th Street
 Suite, Apt. #, etc.

City & State
DANIA, FL
 Zip
33004

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DANIA, FL
 Zip
33004

4. FEI Number **65-0911409**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DEMERS, MARC
2300 GRIFFIN RD., LOT 54
FT. LAUDERDALE FL 33312

7. Name and Address of New Registered Agent

Name **DEMERS MARC.**

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

269 S.W. 7th Street.

City **DANIA** FL Zip Code **33004**

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 Marc Demers **MARC DEMERS** 01/23/02
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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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

TITLE **D** ☐ Delete
 NAME **DEMERS, MARC**
 STREET ADDRESS **2300 GRIFFIN ROAD, LOT 54**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33312**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Change ☐ Addition
 NAME **DEMERS MARC**
 STREET ADDRESS **269 S.W. 7th STREET**
 CITY-ST-ZIP **DANIA, FL 33004**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARC DEMERS **MARC DEMERS** 01/23/02 01/23/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)