

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000039491

1. Entity Name

NOUVELLE DESIGNS, INC.

R

Principal Place of Business

12840 SW 82ND COURT  
MIAMI FL 33156

Mailing Address

12840 SW 82ND COURT  
MIAMI FL 33156

2. Principal Place of Business

4644 S.W 74<sup>th</sup> AVE.

Suite, Apt. #, etc.

3. Mailing Address

PO BOX 560145

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33156

Country

U.S.A.

Zip

33256

Country

U.S.A.

6. Name and Address of Current Registered Agent

SAMPER, MIGUEL  
12840 SW 82ND COURT  
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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. ☐

FILE NOW!!! FEE IS \$550.00

After SEPTEMBER 13, 2000 Min. will be \$750.00  
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 NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

PTD  
SAMPER, MARIE H  
12840 SW 82ND COURT  
MIAMI FL 33156

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

SVD  
SAMPER, MIGUEL  
12840 SW 82ND COURT  
MIAMI FL 33156

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

4644 S.W 74<sup>th</sup> AVE.  
MIAMI, FL. 33156

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

4644 S.W 74<sup>th</sup> AVE.  
MIAMI, FL. 33156

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/00

Date

305-267-8150

Daytime Phone #



DO NOT WRITE IN THIS SPACE

FILED  
Jul 25, 2000 8:00 am  
Secretary of State

07-25-2000 90001 043 \*\*\*150.00

# NOUVELLE

INC.

*Attachment  
of # 0000034191  
DU073608*

Established 1852



## Stimpson

Co. Inc.



INTERNATIONAL REPRESENTATIVES

July 18, 2000

### UNIFORM BUSINESS REPORT

Division of Corporations

P.O. Box 1500

Tallahassee, Fl. 32302-1500

Dear Sirs:

I had just received the form 2000UBR as a SECOND NOTICE. I never received any notice before this one. The mailing address has not changed since we opened the CORPORATION.

Therefore, I kindly ask you to override the penalty charged for late payment.

If you have any questions, please do not hesitate to contact me.

Thanking you in advance for your understanding,

Cordially,

Marie-Helene Samper  
President

4644 S.W. 74th AVENUE, MIAMI, FL. 33155 P.O. BOX 560145, MIAMI, FL. 33256

PH: 305-267-8150 FAX: 305-263-9343

e-mail: [Stimpson1@attglobal.net](mailto:Stimpson1@attglobal.net)