

FILED
Jun 19, 2002 8:00 am
Secretary of State

05-27-2002 90449 030 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

P99000106766

Nuno Inc.

DO NOT WRITE IN THIS SPACE

93937

2. Principal Place of Business

14317 MIRAMAR PKWY

Suite, Apt. #, etc.

3. Mailing Address

6601 LYONS RD.

Suite, Apt. #, etc.

#19

City & State

MIRAMAR, FL

City & State

COCONUT CREEK, FL

4. FEI Number

65-0968279

Applied For

Not Applicable

Zip

Country

33027

USA

Zip

Country

33073

USA

5. Certificate of Status Desired ☐**\$8.75 Additional**
Fee Required

7. Name and Address of Current Registered Agent

Name

NUNO BEIRA

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

12328 W. SAMPLE RD.

City

CORAL SPRINGS

FL

Zip Code

33065

**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

(Signature of Registered Agent or Agent-in-Charge)

(Signature of Registered Agent or Agent-in-Charge)

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 NUNO BEIRA - PRESIDENT / OWNER
NAME
STREET ADDRESS 12328 W. SAMPLE RD
CITY - ST - ZIP CORAL SPRINGS, FL 33065

TITLE
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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)(f), 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 no other like empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/02

(954) 429-1467

Digitally Signed

CR2E0348 (12/01)