## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 16, 2007 8:00 am Secretary of State

DOCUMENT # P99000106766  1. Entity Name NUNO, INC.							04-16-2007	90049 0	10 ***15	50.00
Principal Plac 4611 JOHNS SUITE #2 POMPANO B		Mailing Address 4611 JOHNSON ROAD SUITE #2 POMPANO BEACH, FL 33073			· ·	. · · · · · · · · · · · · · · · · · · ·		5  11 <b>8</b>    <b>88</b>    <b>8</b>    <b>8</b>		I <b>II</b> I (1
Principal Place of Business - No P.O Boy #     Address     Mailing Address										
Suite, Apt.	#, etc.	Suite. Apt. #, etc.				04052007	Chg-P	CR2E03	4 (12/06)	
City & State		City & State			4. FE! Number 65-0968279			_ <del> </del>	plied For t Applicable	
Zip	Country	Zip	Count	ry		5. Certificate of	of Status Desired		8.75 Add ee Required	
	6. Name and Address of Current	Registered Agent					Address of New R	egistered A	jent	
BEIRA, NUNO Neme Beira, Nuno										
15580 SW 49TH COURT HOLLYWOOD, FL 33027				Street Address (P.O. Box Number is Not Acceptable)						
			-	City N	avi			FL	Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office.							n, in the State of Flo		<u>」うろう</u> .miliar with,	and accept
the obligations of registered agent.  SIGNATURE  4112107										
Signature Typed or printed name of regustered opent and rate if ambicable (HOTE Required Apent signature required when reinstants) DATE										
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees										
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFF	ICERS AND I	DIRECTORS	5 IN 11
TITLE	P	☐ Delete	THTLE		50n	ne			Change	Addition
NAME STREET ADDRESS CITY+ST-ZIP	BEIRA, NUNO 15580 SW 49TH COURT MIRAMAR, FL 33027			T ADDRESS ST-ZIP	2703	3 BIrch	Terrac 33330	e.		]
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STREET ADORESS CITY-ST-ZIP			1	1 ADDRESS ST-ZIP						
12. Thereby c	ertify that the information supplied with	this filing does not qualify for		!	ontained i	n Chapter 119.	Florida Statutes. I	further certify	that the in	formation

The early clearly treat the information supplied with this filing does not quality for the exemptions contained in Chapter 119. 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 10 or Block 11 if chapter 607 or an attachment with an address, with all other like empowered.

SIGNATURE: \_

SONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

4/12/07

954-429-140

Daytene Phone #