2001 UN	IIFORM BUSIN	IESS REPOI	RT (UB	R)		U = D	
DOCUMENT # S18485					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
1. Entity Name NOVURANIA OF AMERICA, INC.							
Principal Place of Business Mailing Address					OI Alig -	2 AM 11: YO	
2105 SOUTH US HWY. 1 2105 SOUTH US HWY. 1 VERO BEACH, FLORIDA 32962 VERO BEACH, FLORIDA 329				62	0, 400	- HITTI , Ç	
2. Principal Place	e of Business	3. Mailing Address 701 BRICKELL AVENUE					
Suite, Apt. #, etc.		Suite, Apt. #, etc. SUITE 3000			DO NOT WRITE IN THIS SPACE		
City & State		City & State MIAMI, FLORIDA		١	4. FEI Number Applied For 330049991 Not Applicable		
Zip	Country	Zip	Country		Certificate of Status Desired	\$8.75 Additional	
		33131				Fee Required	
6. Name and Ad	dress of Current Registered	Agent			7. Name and Address of New Re	gistered Agent	(66)
INTRASTATE REGISTERED AGENT CORPORATION				Name ,			2 (9)
701*Brickell Ave., Ste. 3000				Street Address (P.O. Box Number is Not Acceptable)			CR2E034 (9/99)
Miami, Florida 33131							8
•				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							
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. Tax filing requirement and elects to do so. Tax filing requirement and elects to do so. Trust Fund Contribution \$5.00 May Be Added to Fees							
(See criteria or		ND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 11	
TITLE	р	TO DIVERSITY OF THE PROPERTY O		TITLE			
NAME STREET ADDRESS	COLLADA, ROBERT 2105 SOUTH US HWY. 1			NAME STREET ADDRES	AME Change Addition		
CITY-ST-ZIP	VERO BEACH, FLORIDA 32962			CITY-ST-ZIP			
TITLE	VP	· · · · · · · · · · · · · · · · · · ·		TITLE			
NAME STREET ADDRESS	PELLEGRINI, FLAVIA TIONE DE TRENTO	Į	00.000	NAME STREET ADDRES	S TIONE DI TRENTO	Change Addition	
CITY-ST-ZIP	IITALY			CITY-ST-ZIP	ITALY.		
TITLE	T			TITLE NAME			
NAME . STREET ADD/RESS	2105 SOUTH US HWY. 1				40000	14524324-	9
CITY-ST-ZIP	VERO BEACH, FLORIDA 32962			CITY-ST-ZIP	-08.	/08/01U1U48U12 **55 0.00 ****550 .0)()
TITLE	S	г		TITLE	Property Control of the Control of t		
NAME STREET ADDRESS	PELLEGRINI, MIRCO TIONE DE TRENTO	Į	Donou	NAME STREET ADDRES	S TIONE DI TRENTO	Change Addition	
CITY-ST-ZIP	ITALY			CITY-ST-ZIP			
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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 of the same legal effect as if made under oath: that I							
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 of director of the conforation state							
SIGNATURE: SVWIA COUADA 361) 567-9800							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #							