FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

STREET ADDRESS

CITY-ST-ZIP

FILED Mar 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V71411 (5) VENUSA, INC. Principal Place of Business Mailing Address 1210 HOMEWOOD BLVD 203C 1210 HOMEWOOD BLVD 203C **DELRAY BEACH FL 33445** DELRAY BEACH FL 33445 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/12/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 21 65-0364927 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 26 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 25 29 30 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ESTEVES, ARGENIS E H 1210 HOMEWOOD BLVD 203C Street Address (P.O. Box Number is Not Acceptable) **DELRAY BEACH FL 33445** 83 84 85 Zip Code 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered against and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change ☐ Addition TITLE NAME ESTEVES, ARGENIS E H 1.2 NAME 1210 HOMEWOOD BLVD #203C STREET ADDRESS 1.3 STREET ADDRESS DELRAY BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME ESTEVES, GAY L 2.2 NAME 1210 HOMEWOOD BLVD #203C 2.3 STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 4.4 CITY-SY-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 City-S1-7IP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

64 City-St-7IP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changes or para hittachment with an addicts.