

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000005000

**Entity Name:** INMOVEN ENTERPRISES, INC.

**Current Principal Place of Business:**

175 SW 7TH STREET  
SUITE 2005  
MIAMI, FL 33130

**Current Mailing Address:**

PO BOX 563085  
MIAMI, FL 33256 US

**FEI Number:** 27-1713755

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JSH REGISTER AGENT SERVICES, INC.  
200 SOUTH BISCAYNE BOULEVARD  
2700  
MIAMI, FL 33131 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PTS  
Name            NOCERA, LUCA  
Address        P.O. BOX 563085  
City-State-Zip: MIAMI FL 33256

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUCA NOCERA

**MANAGER**

**04/25/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date