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

PROFIT CORPORATION ANNUAL REPORT

1998

NORGEM, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

FILED Apr 27 1998 8:00am Secretary of State



	•									
Principal Place of Business Mailing Address								ALBIT ALBIT ALBIT DIS)))	
C/O JAMES W. JOHNSON 50 SOUTH "E" STREET PENSACOLA FL 32501			C/O JAMES W. JOHNSON 50 SOUTH "E" STREET PENSACOLA FL 32501				DO NOT WRITE IN TI	HIS SPACE		
							3. Date Incorporated or Qualified 07/13/1983			
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	A	Applied For	
21			26				59-2355104	N.	lot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired Section 5. Section 5. Certificate of Status Desired Fee Required			
City & State			City & State				6. Election Campaign Financing	\$5.00	May Be	
23			28				Trust Fund Contribution		to Fees	
Zip	Country		Zip Country			,	8. This corporation owes or has paid the current year intangible			
24	25	29		30			Personal Property Tax due June 30.		□ No	
	9. Name and Address of Curren	t Regis					10. Name and Address of New Registered Agent			
	INSON, JAMES W.				81	Name			1	
50 South "E" Street Pensacola FL 32501					82	Street A	Idress (P.O. Box Number is Not Acceptable)			
					83					
					84	City		FL 85 Zip	Code	
44 Durement I	a the provisions of Sections 607 050	2 and 6	SOZ 1508 Florida Statu	tac the o	200/6	a-named c			its registered	
11. Pursuant to the provisions of Sections 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			A.A. A.M.							
	Signature, typed or printed harric of registered age OFFICERS ANI				ent signature re	ADDITIONS/CHANGES TO OFFICERS		PS IN 12		
12. TITLE	D2	DELETE		1.1 TITLE		ADDITIONATION TO OTHER TO	Change			
NAME	JOHNSON, JAMES W			1.2 NA					_	
STREET ADDRESS	3900 COLLINGSWOOD RD PENSACOLA, FL 00000		1.3 \$		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
City-St-Zip										
TITLE	DV				2.1 TITLE			☐ Change	☐ Addition	
NAME	JOHNSON, NORMA T			2.2 N	LME	į			į	
STREET ADDRESS	3900 COLLINGSWOOD RD					ADDRESS				
CITY-ST-ZIP	PENSACOLA, FL 00000					ST-ZIP			i	
TITLE					3.1 TITLE			Change	Addition	
NAME	•			3.2 N	ME					
STREET ADDRESS				3.3 \$	REET	ADDRESS				
CITY-ST-ZIP				3.4.0	(TY-	ST-ZIP				
TITLE			☐ DELETE	4.1 TI	TLE			Change	Addition	
NAME				4. 2 h	AME	-			ļ	
STREET ADDRESS				4.3 S	REET	ADDRESS			Ì	
CITY-ST-ZIP						ST - ZIP				
TITLE			☐ DELETE	5.1 Ti				Change	Addition	
HAME				5 2 N	AME					
STREET ADDRESS				5.3 S	REET	ADDRESS			ļ	
CITY-ST-ZIP						T-ZIP				
TITLE			☐ DELETE	6.1 T		}		Change	Addition	
NAME				6.2 N		1]	
STREET ADDRESS	_			6.3 \$	TREET	ADDRESS			ļ	
CITY-ST-ZIP		F- 1 - 1 - 1		6.4 C	1Y-S	ST-ZIP	440 07/0/6) Fired Out to	an anality shares	no information	
14. I hereby o	ertity that the infolmation pupplied w	oth this	THIRD does not qualify	ror the ex	emp	DUON Stated	in Section 119.07(3)(i), Florida Statutes. furth	er certify that th	ie information	

indicated on this annual report or symplemental annual report so officer or director of the corporation or the receiver or trustee en Block 12 or Block 13 if changed or on an attachment with in a d accurate and that my signature shall have the same legal effect as if made under oath; that I am ar led to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

4-17-98