

FILE NO. 7: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G98800

(7)

1. Corporation Name

NGMC FINANCE CORPORATION

Principal Place of Business

**% MORRIS J. WATSKY
700 NW 107 AVENUE
MIAMI FL 33172**

Mailing Address

**% MORRIS J. WATSKY
700 NW 107 AVENUE
MIAMI FL 33172**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
02/23/1984

3a. Date of Last Report
05/01/1994

4. FET Number
59-2299382

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Finance and
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. (This corporation has elected to be organized under the laws of the State of Florida Statutes.) ☒ Yes ☐ No

2. Principal Place of Business

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2a. Mailing Address

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State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WATSKY, MORRIS J.
700 NW 107 AVENUE
MIAMI FL 33172**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.06(3), 607.06(4), and 607.06(5), 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, or body, except this appointment as registered agent. I am hereby withdrawing and accept the provisions of Section 607.06(5), Florida Statutes.

SIGNATURE

(Signature of current registered agent, if any, must appear on this statement.)

(Signature of new registered agent, if any, must appear on this statement.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL INFORMATION TO BLOCK 12, OFFICERS AND DIRECTORS

TITLE	DC
NAME	MILLER, LEONARD
STREET ADDRESS	700 NW 107 AVENUE
CITY, ST, ZIP	MIAMI FL
TITLE	D
NAME	BOLOTIN, IRVING
STREET ADDRESS	700 NW 107 AVENUE
CITY, ST, ZIP	MIAMI FL
TITLE	AS
NAME	WATSKY, MORRIS J.
STREET ADDRESS	700 NW 107 AVENUE
CITY, ST, ZIP	MIAMI FL
TITLE	D
NAME	PEKOR, ALLAN, J
STREET ADDRESS	700 NW 107 AVENUE
CITY, ST, ZIP	MIAMI FL
TITLE	PD
NAME	SAIONTZ, STEVEN J.
STREET ADDRESS	700 NW 107 AVENUE
CITY, ST, ZIP	MIAMI FL
TITLE	VP
NAME	KAMINSKY, NANCY
STREET ADDRESS	700 NW 107 AVENUE
CITY, ST, ZIP	MIAMI FL

1. TITLE		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY, ST, ZIP		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that the corporation is in good standing under the laws of the State of Florida. I further certify that the information included on this annual report or supplemental annual report is true and correct, and that the corporation is in good standing under the laws of the State of Florida. I am an officer or director of the corporation or the person or persons who caused this report as required by the Florida Statutes, and that my name appears in Block 12 or Block 13. Changed or voluntarily removed with an address.

SIGNATURE:

Nancy Kaminsky
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/95

229-6400