

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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AND
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95 MAY -1 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # M03649

(4)

1. Corporation Name

NGMC FINANCE CORPORATION, IV

Principal Place of Business

**700 NW 107TH AVENUE
MIAMI FL 33172**

Mailing Address

**700 NW 107TH AVENUE
MIAMI FL 33172**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/07/1984

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2433347

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

7. This corporation has complied with the corporate tax laws of the State of Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21. State Apt # etc

2a. Mailing Address

26. State Apt # etc

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

25. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WATSKY, MORRIS J. ESQUIRE
700 NW 107TH AVE.
MIAMI FL 33172**

81. Name

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

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.01(4) and 607.01(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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.01(4) Florida Statutes.

SIGNATURE

(Signature of Agent or Registered Agent)

(Signature of Agent or Registered Agent)

(Signature)

12. OFFICER, DIRECTOR, OR OTHER OFFICER

13. ADDITIONAL CHANGES TO OFFICERS AND OTHER OFFICERS

NAME	CD MILLER, LEONARD 700 NW 107TH AVE. MIAMI FL
NAME	D BOLOTIN, IRVING 700 NW 107TH AVE. MIAMI FL
NAME	D COLE, ROBERT B. 700 NW 107TH AVE. MIAMI FL
NAME	D PEKOR, ALLAN 700 NW 107TH AVE. MIAMI FL
NAME	VP KAMINSKY, NANCY 700 NW 107TH AVE. MIAMI FL
NAME	VS REED, LINDA 700 NW 107TH AVE. MIAMI FL

1. NAME	☐ Change ☐ Addition
2. NAME	☐ Change ☐ Addition
3. NAME	☐ Change ☐ Addition
4. NAME	☐ Change ☐ Addition
5. NAME	☐ Change ☐ Addition
6. NAME	☐ Change ☐ Addition
7. NAME	☐ Change ☐ Addition
8. NAME	☐ Change ☐ Addition
9. NAME	☐ Change ☐ Addition
10. NAME	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.01(4) Florida Statutes. I further certify that the information submitted on the 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 principal business officer of the corporation to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12, or Block 13, or both, of this report or on an attachment to this report.

SIGNATURE:

Nancy Kaminsky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nancy Kaminsky

4/18/95

(505) 229-6400