Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90167 008 \*\*\*158.75

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 64

Principal Place of Business	1. Curporation	NOR, INC.		٠					
MAMI FL 3196	Principal Place of Business Mailing Address							A OLDER BIDEL DIDLE I	Albin afatt tant
2. Principal Place of Business   2. Mainty Address   2. Mainty Address   3. Max Applicable   3. Not Applicable   3. Certificate of Status Desired   3. Not Applicable   3. Certificate of Status Desired   3. Not Applicable   3. Certificate of Status Desired   3. Not Applicable   3. Not	14352 SW 142 AVE 14352 S W 142 MIAMI FL 33186 MIAMI FL 33186		14352 S W 142 AVENUE MIAMI FL 33186	42 AVENUE			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed		
Subject									
Suite, Apt. #, etc.    27	2. Principal Place of Business 2a. Mailing Address						"	<u> </u>	<u>.                                    </u>
27   27   27   27   27   27   27   27							\ /		
City & State   City & Country   City & City   City & City	⊢ •====, · •, · · · · · · · · · · · · · · · · ·						5. Certifcate of Status Desired		
Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Zi							# Flection Campaign Financing	\$5.00	·May Be
Zip	⊢ ··· · · · · · · · · · · · · · · · · ·						1 1 1		
BISNOR, WILLIAM JOHN, JR. 14352 SW 142 AVE MIAMI FL 33186  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 Zip Code  86 City  FL 85 Zip Code  87 Zip Code  88 A City  FL 85 Zip Code  89 A City  FL 85 Zip Code  89 A City  FL 85 Zip Code  89 A City  FL 85 Zip Code  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 agent. an affailiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  81 A City  FL 85 Zip Code  11. Pursuant to the provisions of Section 607.0505, Florida Statutes.  82 Sirvest Address (P.O. Box Number is Not Acceptable)  83 B A City  FL 85 Zip Code  11. Pursuant to the provisions of Section 607.0505, Florida Statutes.  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Section 607.0505, Florida Statutes.  85 Since Taddress (P.O. Box Number is Not Acceptable)  86 City FL 85 Zip Code  11. Pursuant to the provisions of Section 607.0505, Florida Statutes.  86 City FL 85 Zip Code  12. Time Po Change   Addition Policy   Add	Zip	Zip Country Zip			,		1		□No
EISNOR, WILLIAM JOHN, JR. 14352 SW 142 AVE MIAMI FL 33186  82  Street Address (P.O. Box Number is Not Acceptable)  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 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  15. INTEREF ALORESS OF 142 AVENUE  15. STREET ALORESS IN 142 AVENUE  15. STREET ALORESS IN 14332 S W 142 AVENUE  15. STREET ALORESS IN 14352 S W 142 AVENUE  15. STREET ALORESS IN 14352 S W 142 AVENUE  15. STREET ALORESS IN 14352 S W 144 AVENUE  15. STREET	24			1		-		d Agent	
14. 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 agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hareby accept the appointment as registered agent, an atamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hareby accept the appointment as registered agent, an atamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above or provided by the corporation's board of directors. I hareby accept the appointment as registered agent, an atamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, the appointment as registered agent, an atamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, the appointment as registered agent, an atamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, the appointment as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hareby accept the appointment as registered agent, an atamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes, the appointment as registered agent, or board of directors. I hareby accept the appointment as registered agent, and accept the appointment as registered agent, or board of directors. I hareby accept the appointment as registered agent, and accept the appointment as registered agent, or board of directors. I hareby accept the appointment as registered agent, and accept the appointment as registered agent, or board of directors. I hareby accept the appointment as registered agent, and accept the appointment agent and attained and accept the appointment as registered agent, and accept the appointment as registered agent, or board of directors. I hareby accept the appointment as registered agent, or				81	!	Name			
MAMI FL 33186   83				82	۱.	Street Addre	ess (P.O. Box Number is Not Acceptable)		
SIGNATURE   Synature, typic or printed range of Change and 807, 1508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its 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, 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, 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, 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, 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, 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, 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, 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, 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, or both in the State of Floridas Statutes.  ITILE    DELETE   DELETE						ou out ridare			
11. Pursuant to the provisions of Sections 607.15002 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, and accept the obligations of, Section 607.6505, Florida Statutes.  SIGNATURE  SIGNATURE  PD	MIAN	AI FL 33186		83					
11. Pursuant to the provisions of Sections 607 0502 and 807 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, and accept the obligations of, Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  3 OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  PD DELETE  1.1 TITLE  PD DELETE  1.2 NAME  STREET ADDRESS  CITY-ST-ZP  MIAMI FL  DELETE  1.3 STREET ADDRESS  CITY-ST-ZP  MIAMI FL  DELETE  2.1 TITLE  PD DELETE  3.1 TITLE  Addition  Add				84	1	Citv		85 Zip	Code
office or registered agent, or both, in the State of Horida. Such change was authorized by fund of intercents. Intercent of the part of the flaghters of Section 607 0505, Florida Statutes.  SIGNATURE    12					ı	-			mintered
TITLE PD DELETE 1.1 TITLE	office or r agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligat Signature, typed or printed name of registered agen	of Florida. Such change was autions of, Section 607.0505, Floridated the if applicable.  (NOTE: F	inorized by da Statutes	((16 3.	e corporation	when reinstating)  DATE		
TITLE	12.	C Priett					ADDITIONS/CHANGES TO OFFICERS		DRS IN 12
STREET ADDRESS   14352 S W 142 AVENUE   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP	TITLE	1	[] DELETE						
MIAM   FL	NAME	•							•
TITLE   STD			II 145 VIEWE						
NAME			□ DELETE		1-2	₽P		☐ Change	Addition
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MIAMI FL					TAC	DRESS			
TITLE									
STREET ADDRESS   1238 ANASTASIA AVE   33 STREET ADDRESS   1238 ANASTASIA AVE   34 CITY-ST-ZIP   MIAMI FL   Change   Addition			☐ DELETE	_				☐ Change	Addition
STREET ADDRESS   1238 ANASTASIA AVE				32 NAME		l l	and the second of the second o		
MIAMI FL	ĺ	1		3.3 STREE		DDRESS			
TITLE				3.4. CITY-5	ST-Z	ZIP			
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A4 CITY-ST-ZIP	NAME			4. 2 NAME					
DELETE	STREET ADDRESS:			4.3 STREE	TAL	DDRESS .			
NAME	CITY-ST-ZIP							Change	☐ Addition
STREET ADDRESS	TITLE		∐ DELETÉ				,		
5.4 CITY-ST-ZIP     5.4 CITY-ST-ZIP     6.1 TITLE   Change   Addition   Add					TAT	INDESS.	;		
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A 3 STREET ANNESS								== *	
	NAME STREET ADDRESS			t .	TAI	ODRESS			

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 changed, or on an attachment with an address, with all other like empowered.

6.4 CiTY-ST-ZiP

SIGNATURE: