

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra P. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 486507 (7)

1. Corporation Name
NILRAC, CORP.



Principal Place of Business
1348 NORTH MIAMI AVE.
MIAMI FL 33136

Mailing Address
1348 NORTH MIAMI AVE.
MIAMI FL 33136

2. Principal Place of Business

2a. Mailing Address

21 Suite Apt #, etc.

26 Suite Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

CARLIN JOSEPH
1348 N. MIAMI AVE.
MIAMI FL 33136

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 607.007 and 607.1503, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.007, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Officer or Director

Signature of Officer or Director

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	DELETE
PD	CARLIN, JOSEPH M.	1348 NORTH MIAMI AVE.	MIAMI FL	☐
				☐
				☐
				☐
				☐
				☐
				☐
				☐
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	DELETE	Change	Addition
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐
				☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply for the exemption stated in Section 119.07(3)(g), 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; that I am a resident of this state or have been employed 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Carlin 5-1-96

CR2E034 (12/95)