

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

FILED
Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 538647 (9)

1. Corporation Name
NEWAQ, INC.

Principal Place of Business
1061 SW 30 AVENUE
DEERFIELD BCH. FL 33442

Mailing Address
1061 SW 30 AVENUE
DEERFIELD BCH. FL 33442



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1051 SW 30 Ave. Suite, Apt. #, etc.		2a. Mailing Address 26 1051 SW 30 AVE Suite, Apt. #, etc.		3. Date Incorporated or Qualified 07/05/1977	
22 City & State		27 City & State		4. FEI Number 59-1758909	
23 Zip		28 Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

LATTA, THOMAS M.
1061 SW 30 AVENUE
DEERFIELD BCH. FL 33442

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1051 SW 30 AVE
83
84 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 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	WILSON, GRANT M	1.2 NAME	
STREET ADDRESS	201 CONCORD RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	CARLISLE, MA 00000	1.4 CITY-ST-ZIP	
TITLE	PD	2.1 TITLE	☒ Change ☐ Addition
NAME	LATTA, THOMAS M	2.2 NAME	
STREET ADDRESS	1061 SW 30 AVENUE	2.3 STREET ADDRESS	1051 SW 30 AVE
CITY-ST-ZIP	DEERFIELD BCH. FL	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	☒ Change ☐ Addition
NAME	LATTA, CARLA H	3.2 NAME	
STREET ADDRESS	1061 SW 30 AVENUE	3.3 STREET ADDRESS	1051 SW 30 AVE
CITY-ST-ZIP	DEERFIELD BCH. FL	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	☒ Change ☐ Addition
NAME	POWASNICK, DALE	4.2 NAME	
STREET ADDRESS	1061 SW 30TH AVE.	4.3 STREET ADDRESS	1051 SW 30 AVE
CITY-ST-ZIP	DEERFIELD BEACH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Carla Latta* CARLA LATTA 3/12/98 954-481-9888

CP2E034 (10/97)