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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 615214

1. Corporation Name
NYBORG & ASSOCIATES, INC.

Principal Place of Business	Mailing Address
~~9451 NW 15TH ST.~~ ~~PLANTATION FL 33322~~ 3780 S.W. 149 TERR. MIRAMAR, FL. 33027	~~9451 NW 15TH ST.~~ ~~PLANTATION FL 33322~~ 3780 S.W. 149 TERR. MIRAMAR, FL. 33027

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/23/1979

2. Principal Place of Business	2a. Mailing Address
21 3780 S.W. 149 TERR	26 3780 S.W. 149 TERR.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 MIRAMAR FL.	City & State 28 MIRAMAR, FL.
Zip 24 33027 Country 25 BROWARD	Zip 29 33027 Country 30 BROWARD

4. FEI Number: 59-1909887 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
NYBORG, DANA A. ~~9451 NW 15TH ST.~~ ~~PLANTATION FL 33322~~ 3780 S.W. 149 TERR. MIRAMAR, FL. 33027	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 607.0502 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: Dana A Nyborg PRESIDENT 1-20-99
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	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	NYBORG, DANA A		1.2 NAME	
STREET ADDRESS	~~9451 NW 15TH ST~~ 3780 S.W. 149 TERR.		1.3 STREET ADDRESS	
CITY-ST-ZIP	~~PLANTATION FL~~ MIRAMAR, FL. 33027		1.4 CITY-ST-ZIP	
TITLE	~~SD~~	☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	NYBORG, AUDREY		2.2 NAME	
STREET ADDRESS	~~9451 NW 15TH ST~~		2.3 STREET ADDRESS	
CITY-ST-ZIP	~~PLANTATION FL~~		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (11/98)

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.

SIGNATURE: Dana A Nyborg PRESIDENT 1-20-99 954-450-6051
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #