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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMEN

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 691903

(9)

FILED Feb 05 1998 8:00am Secretary of State

Nno	ASSOCIATES, INC.				
Principal Plac	e of Business	Mailing Address			
4225 GORDON DRIVE 1407 FLANDERS RD. NAPLES FL 34102 SOUTHINGTON CT 06489					
US SSS MINOR OF COASS			DO NOT WRITE IN 1	HIS SPACE	
				3. Date Incorporated or Qualified 06/25/1981	
2. Principal F	Place of Business	2a. Mailing Address	. t	4. FEI Number	Applied For
21		2a. Mailing Address 26 P-Q Cor	itrols, Inc	58-1438628	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc. 27 95 Dolphi	$\tilde{\Delta}$.	5. Certificate of Stałus Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State	aT.	6. Election Campaign Financing	\$5.00 May Be
23	Country	28 Bristol, C	Country	Trust Fund Contribution	Added to Fees
Zip 24	25	<u> </u>	a USA	This corporation owes or has paid the Personal Property Tax due June 30.	e current year Intangible XI Yes No
[24]	9. Name and Address of Current	1201 - 1	3, 437.	10. Name and Address of New Register	
RE	SIDENT AGENT CORP OF PINELL	AS CNTY	81 Name		
	TYRONE BOULEVARD		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	PETERSBURG, FL				
33	710		83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502	and 607.1508, Florida Statutes	s, the above-named corp	oration submits this statement for the purpo- tion's board of directors. I hereby accept the	
office or t	egistered agent, or both, in the State of	of Florida, Such change was at	ithorized by the corporati	ion's poard of directors. I nereby accept the	appointment as registered
agent. La	ım tamıllar witn, and accept the obligal	tions of, Section 607.0505, Flor	ida Statutes.		
agent. I a					
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE,	Registered Agent signature requin	ed when reinstating)	YE
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AND	at and title if applicable. (NOTE.) DIRECTORS	Registered Agent signature requin		AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered agen OFFICERS AND	t and title if applicable. (NOTE,	Registered Agent signature requin	ed when reinstating)	YE
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agen OFFICERS AND	at and title if applicable. (NOTE.) DIRECTORS	Registered Agent signature requirements 13. 1.1 TITLE 1.2 NAME	ed when reinstating)	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G	at and title if applicable. (NOTE.) DIRECTORS	Registered Agent signature requirements 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ed when reinstating)	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR.	at and title if applicable. (NOTE.) DIRECTORS	Registered Agent signature requirements 13. 1.1 TITLE 1.2 NAME	ed when reinstating)	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000	at and tate if applicable. [NOTE.] DIRECTORS DELETE	Registered Agent signature requirements 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ed when reinstating)	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature typed or printed name of registered agen OFFICERS AND PU KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD	at and tate if applicable. [NOTE.] DIRECTORS DELETE	Registered Agent signature requirements 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	ed when reinstating)	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT	at and tate if applicable. [NOTE.] DIRECTORS DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ed when reinstating)	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D	at and tate if applicable. [NOTE.] DIRECTORS DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ed when reinstating)	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA	t and title if applicable. (NOTE.) DIRECTORS DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	t and title if applicable. (NOTE.) DIRECTORS DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA	t and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE	Registered Agent signature requin 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	t and title if applicable. (NOTE.) DIRECTORS DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP 4.1 TITLE	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	t and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	t and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	At and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE DELETE	Registered Agent signature requine 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	t and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	At and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	At and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	DELETE DELETE DELETE DELETE DELETE DELETE	Registered Agent signature requine 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	At and title if applicable. (NOTE.) DIRECTORS DELETE DELETE DELETE DELETE	Registered Agent signature require 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typed or printed name of registered agen OFFICERS AND PD KASTNER, HARRY G 137 WOODLAND DR. SOUTHINGTON, CT 00000 TD SCHUMANN, NOREEN 1407 FLANDERS RD SOUTHINGTON CT D RICH, CECILIA 50 HART ACRE RD	DELETE DELETE DELETE DELETE DELETE DELETE	Registered Agent signature requine 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4, CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ed when reinstating)	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition

4. 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: 100

MONER SNINGTHAR THE Treasure 1/28/98 941-261-868