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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 847791

1. Corporation Name

(1)

NOKIH	I SHURE DEVELOPMENT C	ORP. OF FLORIDA				
Principal Place o	of Business	Mailing Address			1 18910) 18114 Bibls 19011 30018 18181	1501 BIEST BIBIT BIBIT BIBIT BIBIT BIBIT TOBI
2195-PORTLAND COURT WELLINGTON FL-23414		2195 PORTLAND COURT WELLINGTON FL 33114				
					 Date Incorporated or Qualified 12/23/1980 	3a. Date of Last Report 07/05/1995
2. Principal Plan	nce of Business	2a. Mailing Address	_		4. FEI Number	Applied For
1 Suite Apt. #	3 LANTHNA D	Suite, Apt. #, etc.	CAMI	P3-	59-2048482	Not Applicable \$8.75 Additional
2 #2	r, 616.	27 Solite, April 47, etc.	J/1/1/-	_	5. Certificate of Status Desired	Fee Required
City & State		City & State		·	6. Election Campaign Financing	\$5.00 May Be
3 LA	MANA OL	28	Country		Trust Fund Contribution	Added to Fees
4 3346	Country D	Zip 29	Country 30		8. This corporation has liability for in Florida Statutes Yes	intang/ble tax under s=199.032, □ No
" 00 10	9. Name and Address of Current		[30]		10. Name and Address of New R	
			B1 Nan	mo M	100 HOT 12.A	7
MOUHOT			82 Stre		P.O. Box Number is Not Acceptab)ie)
2195 PORTLAND COURT				26	33 LANTAN	1) Kal 97 4
WELLING	GTON FL 33414		83		_	
		_	84 City	LAVI	TANA	85 Zip Code
44 Dozenant to	to the provisions of Sections 607 0502	and COZ 1609 Florida Statutas	the above name	,		FL 33462
or registere familiar with SIGNATURE	to the provisions of Sections 607.0502 ed agent, or both, in the State of Florid th, and accept the obligations of, Section	Mostof	/		951915	
12.	Signature: typechol printed herric of registered agents OFFICERS AND		Registered Agent signate	fure required with	nen reinstaling) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
TIL.f	PTD	DELETE	1.1 TITLE A	CL	WITH MOUHOT	Change Addition
NAME	MOUHOT, R P	- -	1.2 NAME	3 26:	33 LAKTARA Z	Pd#2
STREET ADORESS City-S1-Zip	2195 PORTLAND COURT WELLINGTON FL 33414		1.3 STREET ADDRE 1 4 CITY - ST-ZIP	ISS A A	come to 336	16.2
THLE	AS	DELETE	2 1 TITLE 1/S	$z \mid Ru$	HAND MOUNET	Change Addition
NAME	MOUHOT, JEANNE	~	2 2 NAME	26	33 LAVIANA	21 #2
STREET ADDRESS	2195 PORTLAND COURT		2 3 STREET ADDRE	ESS / A.	NTHUA FE 324	W. ')
CHY-S1-ZP	WELLINGTON FL 33414	DELETE	2.4 CITY-ST-ZIP		C/AWIT IL J-	
'ITLE Nosa:	VS DECOLA, JOSEPH	★ DELETE	3 1 T(TLF 3 2 NAME			Change 🙀 Addition
NAME STREET ADDRESS	200 S. OCEAN DRIVE - 7E		3 2 NAME 3 3 STREET ADORE	vere .		
CITY ST-ZIP	POMPANO BEACH FL 33062	ı	3.3 STREET ADURE	255		
THE	Tomina periori a occu-	DELETE	4. 1 TITLE			Change Addition
NAME			4 2 NAME			
STREET ADDRESS			4.3 STREET ADDRE	ESS		
City St. Zif			4.4 CHTY - ST - ZIP			
T:11 F		☐ DELF1E	5 1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRE	FSS		
C IY · SI · ZiP		□ DELETE	5 4 CHY-ST-ZIP	_		Change Addition
THE		C) precie	6 1 TITLE 62 NAME			☐ cuquês ☐ voourou
STHEET ADDRESS			6.3 STREET ADDRE	100		
CITY - S7 - ZIP			64 CITY-ST-ZIP	155		
14. Ldo hereby	I	with this filing is voluntarily furnis	shed and does not	qualify for t	the exemption stated in Section 119	.07(3)(k), Florida Statutes. I further
certify triat path; that f	t [°] the information indicated on this annu I am an officer or director of the corpo	ual report or supplemental annual pration or the receiver er traction	al report is true and empowered to exe	d accurate a ecute this re	and that my signature shail have the eport as required by Chapter 607, Fi	same legal effect as it made under orida Statutes; and that my name
	i Block 12 or Block 13 if changed, or o				1	, ,
SIGNAT	TIDE: 12 T.	Mento			98/96	407-966-48
SIGITA	SIGNATURE AND TYPED OF	R PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR		Date	Daytime Phone II