

FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED

Jan 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H19895
1. Corporation Name
NADEC, INC.

(2)



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/04/1984

4. FEI Number

59-2460257

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30. ☒ Yes ☐ No

Principal Place of Business

15984 W ST RD #84
12421 SW 10TH CT
SUNRISE FL 33326
US

Mailing Address

15984 W ST RD 84
12421 SW 10TH CT
SUNRISE FL 33326
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

KHAN, NADEER
15984 W ST RD 84
SUNRISE FL 33326

10. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PST ☐ DELETE

NAME KHAN, NADEER
STREET ADDRESS 15984 W ST RD 84
CITY - ST - ZIP SUNRISE FL

TITLE VD ☐ DELETE

NAME KHAN, NEISHA
STREET ADDRESS 15984 ST RD 84
CITY - ST - ZIP SUNRISE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11NAME
11STREET ADDRESS
11CITY - ST - ZIP

21TITLE
21NAME
21STREET ADDRESS
21CITY - ST - ZIP

31TITLE
31NAME
31STREET ADDRESS
31CITY - ST - ZIP

41TITLE
41NAME
41STREET ADDRESS
41CITY - ST - ZIP

51TITLE
51NAME
51STREET ADDRESS
51CITY - ST - ZIP

61TITLE
61NAME
61STREET ADDRESS
61CITY - ST - ZIP

71TITLE
71NAME
71STREET ADDRESS
71CITY - ST - ZIP

81TITLE
81NAME
81STREET ADDRESS
81CITY - 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: X *N. Khan* SIGNATURE REQUIRED

Jan 15 98 8:00am - 384-1890

Date

Daytime Phone # 0297238

CR2E034 (10/97)