COR	PROFIT PORATION JAL REPORT		Sandra B	ITMENT OF STATE • Mortham • y of State	Jan 27 1	ILED 997 8:00am
1997			DIVISION OF CORPORATIONS		Secretary of State	
	MENT # H Name NINDUSTRIES,	123806 INC.	(3)			
Principal Place	e of Business		Mailing Address	······································		
10501 NW 50 3 SUNRISE FL 3			10501 NW 50 STREET. #1 SUNRISE FL 33351-8056	02		
					 Date Incorporated or Qualified 10/03/1984 	3a. Date of Last Report 04/19/1996
2. Principal Pl 1	ace of Business		28. Mailing Address 26	**************************************	4. FEI Number 59-2453157	Applied For Not Applicable
Suite, Apt	#, etc.		Suite. Apt *, etc.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5. Certificate of Status Desired	See Required
City & State)		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
3 Zip 4	Cou 25	ntry	Zip 29	Country 30	8. This corporation has liability for i Florida Statutes	ntangible tax under s. 199.032, Yes 🔲 No
	9. Name and Ad HEO, STEVEN	dress of Current R	egistered Agent	B1 Name	10. Name and Address of New Re	gistered Agent
107	30 NW 4TH STREI			82 Street Add	Iress (P.O. Box Number is Not Acceptab	ole)
PLA	NTATION FL 3332	4				
				83		1
11. Pursuant	to the provisions of S	ections 607.0502 a	nd 607 1508, Florida Statut	84 City	poration submits this statement for the p	FL 85 Zip Code
office or n agent. I a SIGNATURE	egistered agent, or b	oth, in the State of accept the obligatio	Florida, Such change was a ris of, Section 607.0505, Fit	84 City es, the above-named cor authorized by the corpora prida Statutes.		DATE
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office or m agent. I a SIGNATURE 12. TITLE NAME	egistered agent, or b m familiar with, and a Signa are types or prime of V LUBIN, JOEL 7724 HIGHLAND	oth, in the State of accept the obligatio acc of regulared agent a OFFICERS AND D	Florida, Such change was (ris of, Section 607.0505, Fit na little if applicable (NOT DIRECTORS	84 City es, the above-named cor authorized by the corpora brida Statutes. E Registered Agent signature requi	uired when reinslating)	DATE
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