

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J40327 (5)
1. Corporation Name
NECEP, INC.



Principal Place of Business
11010 WILES ROAD
CORAL SPRINGS FL 33065
Mailing Address
11010 WILES ROAD
CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified 10/30/1986
3a. Date of Last Report 02/02/1995

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
26 8873 NW 1st St
27 Suite, Apt. #, etc.
28 Coral Springs FL
29 33071
30 USA
4. FEI Number 59-2733446
5. Certificate 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
ADELMAN, LAURENCE T
1999 UNIVERSITY DR.
SUITE 402
CORAL SPRINGS FL 33071
10. Name and Address of New Registered Agent
81 Name J Daniel Brede
82 Street Address Suite 201 East Building
83 1900 Corporate Blvd NW
84 Boca Raton FL 85 Zip Code 33431

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 607.0502, Florida Statutes.
Signature: *[Signature]* Daniel S Pecan President 3/11/96

12. OFFICERS AND DIRECTORS
12.1 TITLE
12.2 NAME
12.3 STREET ADDRESS
12.4 CITY - ST - ZIP
12.5 TITLE
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12.7 STREET ADDRESS
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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13.97 TITLE
13.98 NAME
13.99 STREET ADDRESS
13.100 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address.
SIGNATURE: *[Signature]* President/Director 3/11/96 305-752-6112
Date: 3/11/96 Daytime Phone # 305-752-6112

CR2E034 (12/95)