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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J92740

(6)

NEDO, INC.

Principal Place of Business

Mailing Address

% GARY P. COHEN 46 SW 1ST ST. 4TH FLOOR MIAMI FL 33130 % GARY P. COHEN 46 SW 1ST ST. 4TH FLOOR MIAMI FL 33130 FILED Feb 03 1998 8:00am Secretary of State



1/22 | SR (305) 661 -0110

DO NOT WRITE IN THIS SPACE

MIAMI FL 3	3130	MIAMI FL 33130				BO 1101 WITE IN 1118 BI AGE	BOTTOT WITTE IT THIS BY AGE		
						3. Date Incorporated or Qualified			
						09/14/1987			
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number	Applied For		
21	26				65:0075477	Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5 Additional		
22		27				5. Certificate of Status Desired L. Fed	Required		
City & State City & State						6. Election Campaign Financing \$5.	00 May Be		
23		28				Trust Fund Contribution			
Zìp	Country	Zip	Country			8. This corporation owes or has paid the current year	Intangible		
24	25 29 30			Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
COHEN, GARY P.					81 Name				
46 SW 1ST ST				82 Street Address (P.Q. Box Number is Not Acceptable)					
	TH FLOOR		82 Street Addre		Street Ac	Address (P.O. Box Number is Not Acceptable)			
	IIAMI FL 33130		83			· · · · · · · · · · · · · · · · · · ·			
rv	MANNETE 33130								
				84	City	prog 85 2	ip Code		
						FL [®] '			
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 of the comparative property of the property of the comparative property of the comparative property of directors. I begin account mean as registered									
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				d Ager	nt signature re	equired when reinstating) DATE			
12.	OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND DIRECT			
TITLE	DP	DELETE	1.1 TI	TLE		☐ Chan	ge 📖 Addition		
NAME	ELSON, DIANA		1.2 NAME				İ		
STREET ADDRESS	901 NW 17TH ST		1.3 STREE		ADDRESS				
CITY - ST - ZIP	MIAMI FL		1.4 CITY-		r-zip		İ		
TITLE	DTS	DELETÉ	2.1 TI	TLE		Chan	ge 🔲 Addition		
NAME	BAUMGARD, DANIEL L.		2.2 NAME		ļ				
STREET ADDRESS			THEFT A	ADDRESS		1			
CITY-ST-ZIP	MIAMI FL			2. 4 CITY - ST - ZIP			1		
TITLE	VP	DELETE	3.1 TITLE			Chan	ge Addition		
NAME	RODRIQUEZ, ORLANDO		3.2 NAM						
					, DODECC		İ		
STREET ADDRESS		·		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP					
CITY - ST - ZIP					I-ZIP	Chan	70 I Addition		
TITLE		TTI DEFEIR	4.1 TI			L1 Chan	ge L Addition		
NAME			4, 2 N			,	į.		
STREET ADDRESS			4.3 \$1	REET /	AODRESS				
CITY-ST-ZIP			4.4 Cl	TY-ST	- ZIP				
TITLE		DELETE	5.1 11	TLE		☐ Chan	ge 🔲 Addition		
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET A	ADDRESS	•	\		
CITY-ST-ZIP			5.4 CI	TY-ST	- ZIP	•			
TITLE		DELETE	6.1 Tr			☐ Chan	ge		
NAME			6.2 NA	ME			1		
STREET ADDRESS					ADDRESS		į		
				TY-ST					
City-St-ZiP	ertily that the Information supplied with	this filing does not qualify fo	o.4 th	empti	ion stated	in Section 119.07(3)(i). Fiorida Statutes, I further certify that	the information		
14. Thereby certify that the Information supplied with this filling 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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to executely this report as required by Chapter 607, Florida Statutes; and that my name appears in									