## 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 #** 

Suite, Apt. #, etc.

City & State

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K10642

(2)

Suite, Apt. #, etc.

City & State

NC MANAGEMENT CORP.

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

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

X Yes

**FILED** 

May 18 1998 8:00am

Secretary of State

| Principal Place of Business                       | Mailing Address                                   | 4 FOOTBOOT BUT FIGUR OBTION ENTER DIGITAL TOUR ( | DABLE MIÐLF ÓFRIÐ STRAF STRAF DJRÍF Í MAT |
|---|---|--|---|
| 50 E. SAMPLE ROAD. #302<br>POMPANO BEACH FL 33064 | 50 E. SAMPLE ROAD. #302<br>POMPANO BEACH FL 33064 | DO NOT WRITE IN                                  | THIS SPACE                                |
|   |   | 3. Date Incorporated or Qualified                |   |
|   |   | 01/05/1988                                       |   |
| 2. Principal Place of Business                    | 2a. Mailing Address                               | 4. FEI Number                                    | Applied For                               |
| 21  | 26  | 59-2866892                                       | Not Applicable                            |

Country

23 28 Zip Country Zφ 24 30

g, Name and Address of Current Registered Agent TODD H MURRAY 50 E SAMPLE RD ~<del>61E-**2**02</del>~

POMPANO BEACH FL 33064

Street Address (P.O. Box Number is Not Acceptable)

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30. 10. Name and Address of New Registered Agent

Trust Fund Contribution

SUITE 302

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             | s of, Section 60 <b>7.0</b> 505, Flo  | orida Statutes.                  | , , , , , ,                                       |
|----------------|---|---------------------------------------|----------------------------------|---|
| SIGNATURE Si   | pnature, typed or punited name of respected agent and | title if applicable (NO)              | Registered Agent signalure requi | iired when reinstaling) DATE                      |
| 12.            | OFFICERS AND DIE                                      |                                       | 13.                              | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE          | S   | DELETE                                | 1.1 TITLE                        | Change Addition                                   |
| NAME           | KRITSCH, F D  |                                       | 1 2 NAME                         |   |
| STREET ADDRESS | 50 E SAMPLE ROAD                                      |                                       | 1.3 STREET ADDRESS               |   |
| CITY-ST-ZIP    | _POMPANO BEACH FL                                     |                                       | 14 CITY-ST-ZIP                   |   |
| TITLE          | D   | DELETE                                | 2 1 THILE                        | Change Addition                                   |
| NAME           | Flaten, Paul  |                                       | 22 NAME                          |   |
| STREET ADDRESS | 1841 NË 45TH ST                                       |                                       | 23 STREET ADDRESS                |   |
| CITY-ST-ZIP    | _FT_LAUDERDALE_FL                                     |                                       | 2 4 CITY-ST-ZIP                  |   |
| TITLE          | D   | ☐ DELETE                              | 3.1 TITLE                        | Change Addition                                   |
| NAME           | TODD, MURRAY  |                                       | 3.2 NAME                         |   |
| STREET ADDRESS | 1841 NE 45TH ST                                       |                                       | 3.3 STREET ADDRESS               |   |
| CITY-ST-ZIP    | FT LAUDERDALE FL                                      |                                       | 3.4. CITY - ST - ZIP             |   |
| TITLE          | D   | ☐ DELETE                              | 4.1 TITLE                        | Change Addition                                   |
| NAME           | HAMMOND, THOMAS                                       |                                       | 4. 2 NAME                        |   |
| STREET ADDRESS | 1841 NE 45TH ST                                       |                                       | 4.3 STREET ADDRESS               |   |
| CITY-ST-ZIP    | FT LAUDERDALE FL                                      | · · · · · · · · · · · · · · · · · · · | 4.4 CITY - ST - ZIP              |   |
| TITLE          | D   | DELETE                                | 5.1 TITLE                        | Change Addition                                   |
| NAME           | SWERDLOFF, MARC                                       |                                       | 5.2 NAME                         |   |
| STREET ADDRESS | 1841 NE 45TH ST                                       |                                       | 5.3 STREET ADDRESS               |   |
| CITY-ST-ZIP    | FT LAUDERDALE FL                                      |                                       | 5.4 CITY - ST - ZIP              |   |
| TITLE          | Р   | DELETE                                | 6.1 TITLE                        | Change Addition                                   |
| NAME           | SCIAMANICO, MICHAEL                                   |                                       | 6.2 NAME                         |   |
| STREET ADDRESS | 50 E. SAMPLE ROAD                                     |                                       | 6.3 STREET ADDRESS               |   |
| CITY_ST_ZIP    | DOMPANO REACH EL                                      |                                       | GARRY ST 7ID                     |   |

eny-st-zip POMPANO BEACH FL

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 suppliemental 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 algorithment with an address.

P. DANIEL KRITSCH