

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 MAY 26 AM 10:42**

**DOCUMENT # L37652 (9)**

1. Corporation Name  
**NAK REALTY CORP.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business <b>1471 SW 30 AVE. DEERFIELD BEACH FL 33442</b>	Mailing Address <b>5609 WILLOW CREEK LANE DELRAY BCH FL 33484 US</b>
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3. Date Incorporated or Qualified <b>12/18/1989</b>	3a. Date of Last Report <b>04/15/1994</b>
4. FEI Number <b>59-2995797</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

9. Name and Address of Current Registered Agent

**NEWMAN, NATHAN  
5609 WILLOW CREEK LANE  
DELRAY BCH FL 33484**

10. Name and Address of Now Registered Agent

<b>B1</b> Name
<b>B2</b> Street Address (P.O. Box Number is Not Acceptable)
<b>B3</b>
<b>B4</b> City
<b>B5</b> Zip 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 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registered) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	<b>DP</b>
NAME	<b>NEWMAN, NATHAN</b>
STREET ADDRESS	<b>1471 SW 30 AVE.</b>
CITY - ST - ZIP	<b>DEERFIELD BCH FL</b>
TITLE	<b>DV</b>
NAME	<b>NEWMAN, ARTHUR</b>
STREET ADDRESS	<b>1471 SW 30 AVE.</b>
CITY - ST - ZIP	<b>DEERFIELD BCH FL</b>
TITLE	<b>DST</b>
NAME	<b>PECHTER, KARL</b>
STREET ADDRESS	<b>1471 SW 30 AVE</b>
CITY - ST - ZIP	<b>DEERFIELD BCH FL</b>
TITLE	<b>DV</b>
NAME	<b>NEWMAN, SCOTT</b>
STREET ADDRESS	<b>1471 SW 30 AVE.</b>
CITY - ST - ZIP	<b>DEERFIELD BCH FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 110.07(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 relevant 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: *Nathan Newman* *Arthur Newman* *Carl Pechter* *Scott Newman* *Pres* *5/20/95* *(407) 499-9637*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ (Date) \_\_\_\_\_ (Telephone) \_\_\_\_\_