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

STREET ADDRESS

CITY-ST-ZIP

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 16 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (2)L62715 NESCORP, INC. Principal Place of Business Mailing Address C/O NORMAN HOFFER C/O NORMAN HOFFER 4830 SW 74TH COURT 4830 SW 74TH COURT DO NOT WRITE IN THIS SPACE MIAM! FL 33155 MIAMI FL 33155 3. Date Incorporated or Qualified 04/02/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0227041 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HOFFER, NORMAN 4830 S.W. 74TH COURT Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33155** 83 84 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 of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE. Registered Agent signature required when reinstating DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition TITLE 1,1 TITLE Chance HOFFER, NORMAN NAME 1.2 NAME 4830 S.W. 74TH COURT STREET ADORESS 1.3 STREET ADDRESS MIAMI FL 33 )-55 CITY - ST- ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change \_\_\_ Addition HOFFER, STEVEN NAME 22 NAME 4830 S.W. 74TH COURT STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33155 CITY - ST - ZIP 2. 4 CITY - ST-ZIP DELETE TITT F Change Addition 31 TITLE HOFFER, EDWARD 3.2 NAME NAME 4830 S.W. 74TH COURT STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33) << CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADORESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP

> > 1-9-95

(305) 662-8701

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 if changed, or on an attachment with an address.

SIGNATURE: TOWNS NOTED IN SPECIAL PLUS TOWN NOTED

CR2E034