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

**CORPORATION ANNUAL REPORT** 

1998

NENETTE, INC.

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

M07090

(7)

## **FILED** May 04 1998 8:00am Secretary of State



Principal Place of Businoss  838 VIA ROSA BOCA RATON FL 33433 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 10/25/1984  2. Principal Place of Business 2. Mailing Address 4. FEI Number Applied For Not Applicable Sulte, Apt. #, etc. Sulte, Apt. #,
BOCA RATON FL 33433 US  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 10/25/1984  2. Principal Place of Business 26. Mailing Address 26. Mailing Address 3. Date Incorporated or Qualified 10/25/1984  2. FEI Number Applied For Not Applied For Not Applied For Not Applied For Suite, Apt. #, etc. 27  City & State City & State City & State City & State 28  Zip Country Zip Country Zip Country Applied For Suite, Apt. #, etc. 28  Trust Fund Contribution Added to Fees Address of Current Registered Agent  GRUNBERG, NENETTE 8383 VA ROSA BOCA RATON FL 33433  84  City FL 85  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 accent the appointment as 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 accent the appointment as 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 accent the appointment as registered office or registered.
2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Fin Number 4. FEI Number 65-0402103 5. Certificate of Status Desired 6. Election Campaign Financing 7 Frust Fund Contribution 7 Added to Fees 7 Added to Fees 7 Added to Fees 7 Added to Fees 8 This corporation owes or has paid the current year Intangible 9 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 7 Name 8 Street Address of New Registered Agent 8 Street Address of New Registered Agent 8 Street Address (P.O. Box Number is Not Acceptable) 8 Street Address of Poor Number is Not Acceptable of Status Desired 8 Street Address (P.O. Box Number is Not Acceptable) 9 Personal Property Tax due June 30. Yes No 9 Street Address of New Registered Agent 10 Name and Address of New Registered Agent 11 Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above and corporation's board of directors. I hereby accept the appointment as 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 office or registered agent.
28. Mailing Address 29. Mailing Address 20. Sulte, Apt. #, etc. 20. Sulte, Apt. #, etc. 21. Sulte, Apt. #, etc. 22. Sulte, Apt. #, etc. 23. City & State 24. City & State 25. Certificate of Status Desired
26 Sulte, Apt. #, etc. Sulte, Apt. #, etc.  City & State City & State  City & State  Zip Zip Zip Zip Zip Zip Zip Zip Zip Zi
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City & State  City & State  Zip  Country  B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  QRUNBERG, NENETTE  8383 VA ROSA  BOCA RATON FL 33433  84  City  FL 85  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 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 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
Trust Fund Contribution Added to Fees  Zip Country Zip Country  25 29 30 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  GRUNBERG, NENETTE  6383 VIA ROSA  BOCA RATON FL 33433  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 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 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
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agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE
Signature, typed or profited name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DAT PST DELETE 1.1 TITLE PST
NAME GRUNBERG, NENETTE 12 NAME Nenette Grunberg
STREET ADDRESS 6383 VIA ROSA 1.3 STREET ADDRESS 6383 Via Rosa
CITY-ST-ZIP BOCA RATON FL 14 CITY-ST-ZIP Boca Raton 17 33433
TITLE V.P. DELETE 21 TITLE V.P. T. Change Addition
NAME TINGHINO, THOMAS R 22 NAME Tinghew Thomas R.
STREET ADDRESS 6383 VIA ROSA 23 STREET ADDRESS 6.3 8 3 VI a Rosa
CITY-ST-ZIP BOCA RATON FL 33433 2 4 CITY-ST-ZIP BOCA Raton Ff 53 433
TITLE DELETE 31 TITLE Change Addition
NAME 32 NAME
STREET ADDRESS 3.3 STREET ADDRESS
CITY-ST-ZIP 3.4. CITY-ST-ZIP
TITLE DELETE 4.1 TITLE Change Addition
NAME 4. 2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-ST-ZIP 4.4 CITY-ST-ZIP
TITLE DELETE 5.1 TITLE Change Addition
NAME 5.2 NAME
STREET ADDRESS 5.3 STREET ADDRESS
<u>CITY-ST-ZIP</u> 5.4 CITY-S1-ZIP
TITLE DELETE 6.1 TITLE Change Addition
NAME 62 NAME
STREET ADDRESS . 63 STREET ADDRESS
CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 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. 561