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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 18 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

I. Corporatio	MENT # M98928 NE ENTERPRISES, INC.	3 (8)			Î ROMANÎ ME PÎSTAN ÎNIVÎ LÎ ÎLÎ BERÎNÎ HAN ÎN	DH
Principal Ploc	o of Ausiness	Mailing Address				JH 0188 HELI ALBI ALDI 510H 140H
Principal Place of Business W P.J. KANE 2500 N. POWERLINE ROAD POMPANO BEACH FL 33069		% P.J. KANE 2500 N. POWERLINE ROAD POMPANO BEACH FL 33069-1049				
					3. Date Incorporated or Qualified 09/16/1988	3a. Date of Last Report 03/26/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0075791	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Added to Fees	
Zip	Country	Zip	Country		8. This corporation has hability for int	angible tax under s. 199.032, Yes ☐ No
24	25 25 25 25 25 25 25 25 25 25 25 25 25 2	29 3	0		Florida Statutes 10. Name and Address of New Regi	
		r negistered Agent	81	Name	10; Hamo and Address of Man Heg.	
	NE, PATTIE J. O NORTH POWERLINE ROAD		82	Cirnet Add	Iress (P.O. Box Number is Not Acceptable	.1
	MPANO BEACH FL 33069	•	62	Street Add	iress (F.O. Box Naimber is Not Acceptable	7
			83			
			84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the above	e-named cor	poration submits this statement for the pul ation's board of directors. I hereby accept	
office or agent. La	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 607.0505, Florid	thorized by da Statutes	/ the corpora s.	ation's board of directors. I hereby accept	the appointment as registered
SIGNATURE						
10	Signature, typod or printed name of registerco ago OFFICERS AND		Registered Age	int signature requ	ared when reinstating) ADDITIONS/CHANGES TO OFFICE	BS AND DIRECTORS IN 12
12.	DP OFFICERS ARE	DELETE	1.1 TITLE		TIED IT TO THE TOTAL OF THE TOT	Change Addition
NAME	KANE, P.J.	1.2				
STREET ADDRESS	2500 N POWERLINE RD			address		
CITY - ST - ZIP	POMPANO BEACH FL			ST - ZIP		·
TIFLE	VP	☐ DELETE 21		}		Change Addition
NAME			22 NAME			
STREET ADDRESS			2 3 STREET			
CITY ST ZIP	POMPANO BEACH FL			ST-ZIP		Change Addition
TITLE		[טנונונ	3.1 TITLE 3.2 NAME			
NAME STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-S1-ZIP			3.4 CITY-1			
TITLE		DELETE 4.1				Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
C+TY - S1 - ZIP			4.4 CITY - S	ST - ZIP		
TITLE	DELETE 5		5 1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET	è		
C TY-ST-ZIP		DELETE	5.4 CITY - S	SI - ZIP		Change Addition
1IfLE			6.1 TITLE			C Ottomage C Manager
NAME			6.2 NAME 6.3 STREET	TADDRESS		
STREET ADDRESS			6.4 CITY - 5	ì		
CITY-ST-ZIP	1	d that is files along not availe.			ed in Section 119 07/9Vi\ Florida Statutes	I further cortily that the

I do hereby 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 oath; that I am an officer or director of the corporation or the regioner 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 addition.