FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1997**		FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham** Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N95000005461 (7)

1. Corporation Name

NIGERIAN AMERICAN FORUM OF FLORIDA (NAFF), INC.

Principal Place of Business	Mailing Address
% DR. JERRY KOLO 220 SW 2ND AVE. FT. LAUDERDALE FL 33301	% DR. JERRY KOLO 220 SW 2ND AVE. FT. LAUDERDALE FL 33301

3. Date Incorporated or Qualified 11/13/1995	3a. Date of Last Report 07/18/1996

2. Principal Place of Business [21]	2a. Mailing Address [26] c/o Dr. Jerry Kolo	4. FEI Number 65-0663592	Applied For ☐ Not Applicable ☐
Suite, Apt. #, etc. [22]	Suite, Apt. #, etc. [27] 220 S.E. 2nd Ave.	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State [23]	City & State [28] Ft. Lauderdale, Fl	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip [24]	Country [25]	Zip [29] 33301	Country [30]	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
UGWEJE, OKECHUKWU C 15999 SW 8TH AVE, SUITE 1-205 DELRAY BEACH FL 33444	[81] Name AZEBEOKHAI, ANDREW [82] Street Address (P.O. Box Number is Not Acceptable) [83] 2701 RIVERSIDE DRIVE, # B515 [84] City CORAL SPRINGS FL [85] Zip Code 33065

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ Andrew A. Azebeokhai, President 3/7/97

Signature, typed or printed 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 **P** NAME **UGWEJE, OKECHUKWU** STREET ADDRESS **15999 SW 8TH AVE., A-205** CITY-ST-ZIP **DELRAY BEACH FL 33444**	☒ DELETE	1.1 TITLE **PD** 1.2 NAME **AZEBEOKHAI, ANDREW** 1.3 STREET ADDRESS **2701 Riverside Drive #B515** 1.4 CITY-ST-ZIP **Coral Springs, Fl 33065**	☒ Change ☐ Addition
TITLE **D** NAME **OBICHERE, IHENACHOU** STREET ADDRESS **5345 GATE LAKE RD.** CITY-ST-ZIP **TAMARAC FL 33319**	☒ DELETE	2.1 TITLE **S D** 2.2 NAME **JONES, LYNN** 2.3 STREET ADDRESS **5345 Gate Lake Road** 2.4 CITY-ST-ZIP **Tamarac, Fl 33319**	☐ Change ☒ Addition
TITLE **T** NAME **AZEBEOKHAI, ANDREW** STREET ADDRESS **2701 RIVERSIDE DR. #B-515** CITY-ST-ZIP **CORAL SPRINGS FL 33065**	☐ DELETE	3.1 TITLE **T D** 3.2 NAME **UGWA, DANIEL** 3.3 STREET ADDRESS **1922 Seville Street** 3.4 CITY-ST-ZIP **Margate, Fl 33025**	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/96)

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

_____ ANDREW AZEBEOKHAI 3/7/97 (954) 431-7866