2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N97000004880

Entity Name
 MONTENEGRIN-CULTURAL SOCIETY "NJEGOS" INC.



FILED Apr 20, 2006 8:00 am Secretary of State

04-20-2006 90209 029 ****70.00

FLORIDA U.S.A.										
2801 NE 39TH ST 280		Mailing Address 2801 NE 39TH ST LIGHTHOUSE POINT, FL				,				
2. Principal Place of Business		3. Mailing Address				<u> </u>	UII Ba in Bai n (1100)		# # 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04162006	Chg-NP	CR2E037 (11	/05)		
City & State		City & State			4. FEI Number 31-1565				plied For t Applicable	
Zip	Country	Zip	Country		5. Certificate o	of Status Desired		5 Add		
6. Name and Address of Current Re		legistered Agent	stered Agent		7. Name and Address of New Registered Agent					
FRANOVICK, BRANKO				Name						
2801 NE 39TH ST LIGHTHOUSE POINT, FL 33064-8443			Street	Street Address (P.O. Box Number is Not Acceptable)						
			City				LT"	p Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.										
M. A.										
SIGNATURE WADNES / MONOPULL BRANKO FRANOVICK 4/17/06										
Signature, typed or printed normal registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) SATE										
Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campaign Filing Fund Contribution					\$5.00 May Be Added to Fees		llake check pays rida Department			
10.	OFFICERS AND DIRI		11.	A	DDITIONS/CHA	NGES TO OFFICE	ERS AND DIRECTO	RS IN	10	
TITLE Name	PD DJURDJIC, GEORGE V	Delete	TITLE NAME				□ C	nange	☐ Addition	
STREET ADDRESS	1825 S OCEAN DR. APT. 310		STREET ADDRESS							
CITY-ST-ZIP	HALLANDALE, FL 33009		CITY-ST-ZIP	<u> </u>						
TITLE Name	SD LUCIC, MIROSLAV	Delete	TITLE NAME				☐ CI	nange	☐ Addition	
STREET ADDRESS	17275 COLLINS AVE., #207		STREET ADDRESS							
CITY-ST-ZIP	SUNNY ISLES BEACH, FL 33160)	CITY-ST-ZIP							
TITLE	TD	Defete	TITLE				□ cı	nange	Addition	
NAME STREET ADDRESS	VUKOVIC, PREDRAG 2501 WOODLAND ESTATES RD.		NAME STREET ADDRESS						ļ	
CITY-ST-ZIP	NAPLES, FL 34117		CITY-ST-ZIP						1	
TITLE	D	☐ Delete	TITLE	PL)		Æ cr	nange	Addition	
NAME	FRANOVICK, BRANKO		NAME	' _			•			
STREET ADDRESS CITY-ST-ZIP	2801 NE 39TH ST LIGHTHOUSE POINT, FL 33064		STREET ADDRESS CITY-ST-ZIP							
TITLE	D	☐ Delete	TITLE	TD	I	•	⊠ CI	nange	Addition	
NAME	ROMANOVIC, MILO		NAME	' -				-	_	
STREET ADDRESS CITY-ST-ZIP	940 NW 56TH ST. FORT LAUDERDALE, FL 33309		STREET ADDRESS CITY-ST-ZIP							
TITLE	TONT ENOBERDALE, FL 33309	☐ Delete	TITLE	SD			□ C1	námne	Addition	
NAME		- Oceas	NAME	LAL	JCIC, D	USANK	A	en i Re	AURION	
STREET ADDRESS			STREET ADDRESS	565	2 NW	106 th A	IVE.		ļ	
			CITY-ST-ZIP	COF	RAL SPR	INGS, FI	A IVE . L 33076	-2	8//	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information										

indicated on this report or supplemental 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR