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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

1998 **DOCUMENT #**1. Corporation Name

P92000013471 (7)

NEW CONCEPT PROPERTIES OF AMERICA, INC.

8340 NW 58TH ST. MIAMI FL 33166	8340 NW 58TH ST.	
MIMMI PL 33100	MIAMI FL 33166	
Principal Place of Business	2a. Mailing Address	

FILED May 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address														
8340 NW 581 Miami FL 33		8340 NW 58TH ST. MIAMI FL 33166						DO NOT V	MITE IN T	IIC CDAOC				
								-	3. Date Incor	porated or Qual		113 SPAUL	-	
2. Principal P	lace of Busi	ness	2a.	Mailing Address					4. FEI Numbe				Ap	plied For
21			26						65-03	76911		 "	\rightarrow	t Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.							a \square	\$8		Additional
22			27					'	•. Certificate	of Status Desire	ه ت	F	ee Re	quired
City & Stat	e			City & State					6. Election Ca	mpaign Financi	ng	\$!	5.00	May Be
23			28						Trust Fund	Contribution				o Fees
Zip		Country		Zip	Co	untry	1		8. This corpo	ration owes or h	as paid the	current ye	ar Inte	angible
24		25	29		30					roperty Tax due		Yes] No
		and Address of Cur	rent Regia	itered Agent		1			0. Name and	Address of Ne	w Register	red Agent		
	wis, edg/					81	Nar	me						
KE	eith, mach	K, LEWIS, COHEN 8	LUMPKI	N		82	Stre	eet Address	(P.O. Box Nu	mber is Not Acc	eptable)			
20	O S BICAY	NE BLVD, \$2000												
ML	AMI FL 33°	131				63								-
						84	City					85	Zip (`ndo
						1 1	"",	•				▝▐▃▕▔▔▐	•	
11. Pursuant office or r	to the provis	ions of Sections 607.0 gent, or both, in the Sta ith, and accept the ob	502 and 6	07.1508, Florida Stat da. Such change wa	tutes, the is authorize	above ed by	e-nam	ned corporation's	tion submits the board of dire	nis statement for actors. I hereby	the purpos	e of chang appointme	ging its ent as	s registered registered
SIGNATURE														
40	Signature, typed	or printed name of registered					ngia tne	rature required wh		1011411050 70	DAT		~~~~	0.151.40
12.	Р	OFFICERS A	AND DIREC		13				ADDITIONS	CHANGES TO	DEFICERS			
TITLE	l '	ADAL DEDTA		☐ DELETE		TITLE						☐ Ch	ange	Addition
NAME		ADALBERTO				NAME								
STREET ADDRESS		W 93 DORAL CT			1.3 9	STAEET	ADDRE	ESS						
CITY-ST-ZIP	MIAMI I	<u>- L</u>		T acieve		CITY-S	T-ZIP					<u> </u>		7 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
TITLE	ļ * .	05 010007441		☐ DELETE		TITLE		į.				☐ CH	ange	Addition
NAME		ISE, CHRISTIAN			2.2	NAME								
STREET ADDRESS		W 106TH AVE			2.3	STREET	ADDRE	ESS						
CITY-ST-ZIP	MIAMI	-L			2.4	CITY - S	ST-ZIP							
TITLE				☐ DELETE		TITLE						☐ Ch	ange	Addition
NAME					3.21	VAME								
STREET ADDRESS					3.3 9	STREET	ADDRE	ESS						
CATY-ST-ZMP						CITY-S	ST-ZIP							
TITLE				DELETE	4.11	TITLE						☐ Ch	ange	Addition
NAME					4.2	NAME								
STREET ADDRESS					4.3 5	STREET	ADDRE	ESS						
CITY-ST-ZIP					4.41	CITY-S	T-ZIP							
TITLE				☐ DELETE	5.11	ITLE						☐ Ch	ange	☐ Addition
NAME					5.21	NAME								
STREET ADDRESS					5.3 \$	STREET	ADDRE	ESS						
CITY-ST-ZIP					5.41	CITY-S	T-ZIP							
TITLE				☐ DELETE	6.1 1	IITLE						Ch	ange	Addition
NAME					6.21	MAME								
STREET ADDRESS					6.3 5	TREET	ADDRES	ess						
CITY-ST-ZIP					6.4 (CITY-S	T-ZIP							

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 employee do 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 add ess.

SIGNATURE:

Pres. A/25/98