

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000003369 (4)

1. Corporation Name

NOMER INTERNATIONAL TRADING, INC.



Principal Place of Business

Mailing Address

~~2100 CONSTITUTION BLVD., # 119~~  
SARASOTA FL 34231  
US

~~2100 CONSTITUTION BLVD., # 119~~  
SARASOTA FL 34231  
US

3. Date Incorporated or Qualified  
01/14/1993

3a. Date of Last Report  
02/14/1995

2. Principal Place of Business

2a. Mailing Address

21 6150 Clark Center Avenue

26 6150 Clark Center Avenue

4. FEI Number  
65-0384238

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

22 City & State

27 City & State

23 Sarasota, Fl.

28 Sarasota, Fl.

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 Zip

Country

29 Zip

Country

34238

USA

34238

USA

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

CENGIZ K. NOMER  
2100 CONSTITUTION BLVD., # 119  
SARASOTA FL 34231

81 Name  
Cengiz K. Nomer

82 Street Address (P.O. Box Number is Not Acceptable)  
6150 Clark Center Avenue

83

84 City  
Sarasota

FL 85 Zip Code  
34238

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE CENGIZ K. NOMER

4-22-96

Signature of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE PD ☐ DELETE

NAME CENGIZ NOMER K.  
STREET ADDRESS 2100 CONSTITUTION BLVD., # 119  
CITY-ST-ZIP SARASOTA FL 34231

1.2 NAME ☐ DELETE

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ DELETE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ DELETE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ DELETE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ DELETE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ DELETE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

NAME Cengiz K. Nomer  
STREET ADDRESS 6150 Clark Center Avenue  
CITY-ST-ZIP Sarasota, Fl. 34238

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: CENGIZ K. NOMER

4-22-96

(941) 923-0872

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E034 (12/95)