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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000060420 (5) **DOCUMENT #** NORCOT INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1632 SW BASCOM AVENUE 1632 SW BASCOM AVENUE PORT ST. LUCIE FL 34953 PORT ST. LUCIE FL 34953 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/26/1993 2. Principal Place of Business 21 1632 SW 4. FEI Number 2a. Mailing Address Applied For 1632 65-0430629 Not Applicable Suite, Apt #, etc. Suite, Apl. #, etc \$8.75 Additional X 5. Certificate of Status Desired Fee Required City & State City & State \$5,00 May Be 6. Election Campaign Financing Εľ 51 Lucie Trust Fund Contribution Added to Fees Country 34952 Country 8. This corporation owes or has paid the current year Intangible <u>U</u>5A AZU 25 29 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name BRUHN, NORMAN **4710 NE 8TH TERRACE** Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33334 83 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition BRUHN, NORMAN J NAME 1.2 NAME **4710 NE 8TH TERRACE** STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33334 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition BRUHN, SCOTT NAME 2.2 NAME 1632 SW BASCOM AVENUE STREET ADDRESS 23 STREET ADDRESS PORT ST. LUCIE FL 34953 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Change DELETE Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

4.1 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 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 any attachment with an address.

SIGNATURE: