

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000064848 (3)
1. Corporation Name

NEW IMAGE GROUP INC.

Principal Place of Business

19628 N. BACK NINE DR.
BOCA RATON FL 33496

Mailing Address

19628 N. BACK NINE DR.
BOCA RATON FL 33496



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/15/1993

4. FEI Number

65-0436714

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 11145 HARBOUR SPRINGS CIRCLE

Suite, Apt. #, etc.

2a. Mailing Address

26 11145 HARBOUR SPRINGS CIRCLE

Suite, Apt. #, etc.

22 City & State

23 BOCA RATON, FLORIDA

24 Zip

Country

33428

USA

City & State

28 BOCA RATON, FLORIDA

Zip

Country

33428

USA

9. Name and Address of Current Registered Agent

URZUA, ALEJANDRO
19628 N. BACK NINE DR.
BOCA RATON FL 33496

10. Name and Address of New Registered Agent

81 Name

URZUA, ALEJANDRO

82 Street Address (P.O. Box Number is Not Acceptable)

11145 HARBOUR SPRINGS CIRCLE

83

84 City

BOCA RATON

FL

85 Zip Code

33428

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

ALEJANDRO URZUA, PRESIDENT

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME ALEJANDRO, URZUA
STREET ADDRESS 19628 N. BACK NINE DR.
CITY-ST-ZIP BOCA RATON FL

TITLE VP ☐ DELETE

NAME PAGE, LINDSEY
STREET ADDRESS 19628 N. BACK NINE DR.
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME URZUA, ALEJANDRO
1.3 STREET ADDRESS 11145 HARBOUR SPRINGS CIRCLE
1.4 CITY-ST-ZIP BOCA RATON - FL - 33428

2.1 TITLE VP ☒ Change ☐ Addition

2.2 NAME PAGE, LINDSEY
2.3 STREET ADDRESS 11145 HARBOUR SPRINGS CIRCLE
2.4 CITY-ST-ZIP BOCA RATON - FL - 33428

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 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 an attachment with an address.

SIGNATURE:

7-15-98

(561) 4778599

CR2E034 (5/98)