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

PROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

FILED Feb 02 1998 8:00am Secretary of State

	NL PALM GAS		, INC.	(0)						
Principal Plac	e of Business		Mailing Address			I	<u> 1820/880 18 18188 1111 880 881</u>		IDI IDIDI DIRBI	
2290 CORAL SPRINGS DR 2290 CORAL SPRINGS D					•					
CORAL SPRINGS FL 33071 CORAL SPRINGS FL 330							DO NOT WRITE IN THIS SPACE			
						0 Data			PACE	
						I	Incorporated or Qualified			
6 Principal P	2. Principal Place of Business			000		4. FEI N	1/27/1993		TAR	plied For
	21			2a. Mailing Address			55-0440252			ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			1			\$8.75	
22			27			5. Certif	icate of Status Desired		Fee Re	
City & State			City & State			6. Electi	on Campaign Financing		\$5.00	May Be
23			28			1 '	Trust Fund Contribution Added to Fees			
Zip			Zip Country		Country	8. This o	8. This corporation owes or has paid the current year Intangible			
24	25		2930				Personal Property Tax due June 30. Yes No			
	g. Name and A	ddress of Current	Registered Agent			10. Name	and Address of New R	legistered A	gent	
N	AIRVIS, ANATLOY	,			81 Name					
2319 N ANDREWS AVE					82 Street	Address (P.O. Bo	x Number is Not Accepta	able)		
FT LAUDERDALE FL 33311										
					83					
					84 City				85 Zip (Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the								FL		
11, Pursuant	to the provisions of	Sections 607.0502 both in the State of	and 607.1508, Florid f Florida, Such chan	da Statutes, i ion was auth	the above-named lorized by the corr	corporation subrocration's board (nits this statement for the of directors. I hereby acco	purpose of ept the appo	changing it sintment as	s registered registered
agent. I a	m familiar with, and	accept the obligati	ions of, Section 607.	0505, Florida	a Statutes.		,	, ,,		
SIGNATURE								DATE		
	Signature, lyped or printed	of registered agent OFFICERS AND		(NOTE Re	igistered Agent signature		IONS/CHANGES TO OFF		DIRECTOR	RS IN 12
12. TITLE	DP	OI FIGENS AND	DINCOTORIS	LETE	1.1 TITLE	ADDIT	ONO/OFFANGES TO OFF		Change	Addition
NAME					1.2 NAME					
STREET ADDRESS 16558 NE 26TH AVE #5F					1.0 10 000		1	<i>[2</i>]	•	
CITY-ST-ZIP N MIAMI BCH FL 33160					1.3 STREET ADDRESS	2290 G	ORAL SPRING	5 DR	ive	
TITLE	11 100 000 000				1.3 STREET ADDRESS	2290 G	ORAL SPRINGS	S DR F/	ive 33/	60.
i			DE DE	LETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	2290 G	ORAL SPRINGS,	S DR F/)// <i>e</i> 33/ □ Change	60 .
I NAME	ST	H FL 33160	DE	LETE	1.4 CITY-ST-ZIP	2290 (1 CORA)	ORAL SPRINGS	S DR	_	
NAME STREET ADDRESS	ST MIRVIS, GEN	H FL 33160 NE	□ DE	LETE	1.4 CITY-ST-ZIP 2.1 TITLE	2290 G	ORAL SPRINGS	S DR	_	
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	ST MIRVIS, GEN 2290 CORAI	H FL 33160 NE	DE		1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	2290 (CORA)	oral Spring Springs,		_	
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of possible for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of its true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in ith an address.

SENE MIRNIS 1-33-98 (95Y) 4680 I hereby certify that the information supplied wit indicated on this annual report or supplemental officer or director of the corporation or the receiblock 12 or Block 13 if changed or on an extra