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

CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000073458 (0) **DOCUMENT #**

NARO INTERNATIONAL, INC.

Principal Place of Business Mailing Address 5790 62ND AVE. N. 5790 62ND AVE. N. PINELLAS PARK FL 34665 PINELLAS PARK FL 34665

FILED Apr 13 1998 8:00am Secretary of State



4-6-98 813 343-1131

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/22/1993 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For STH AVE S 5972 21 59-3207884 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 8. Election Campaign Financing \$5.00 May Be ST PETERSBURG FL Trust Fund Contribution Added to Fees 23 Zip Country Country This corporation owes or has paid the current year Intangible USA 33707 30 ☐ Yes ☐ No 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SCHRADER, PAUL 7116 CENTRAL AVE Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33707 83 City 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TELLE JACOB, VICTOR J NAME 1.2 NAME 9401 SUN ISLE DR. NE STREET ADDRESS 1.3 STREET ADDRESS ST PETERSBURG FL 33702 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME MOBAYED, SAMI 2.2 NAME STREET ADDRESS 2495 37TH AVE. N. 2.3 STREET ADDRESS ST PETERSBURG FL 33713 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 3.1 TITLE SCHRADER, PAUL NAME 3.2 NAME 7116 CENTRAL AVE. STREET ADDRESS 3.3 STREFT ADDRESS ST PETERSBURG FL 33707 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 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 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 on an attachment with an address.

SIGNATURE:

SCHLAPEL

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