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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name P94000025404 (2)

NFM, INC.

**FILED** Feb 05 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							I JOBINSON NO ESTAN DIBIN DONA DONA DONA DENNI DENNI D	)		<b>              </b>			
200 S. BASCAYNE BLVD. SUITE 1050 MIAMI FL 33131 US			S	200 S. BASCAYNE BLVD. SUITE 1050 MIAMI FL 33131 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified					
2. Principal P	Place of Busine			Mailing Addres				03/27/1994 4. FEI Number			- P F		
	IACO OF DUSING	355	— <u>—</u>	Walling Addres	5						plied For		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				65-0040331   Not Applicate					
22	_		27	27				5. Certificate of Status Desired Fee Required					
City & State	City & State				City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip		Country		Zip Counti			,	This corporation owes or has paid the current year Intangible					
24					30	Personal Property Tax due June 30. Yes No							
<del> </del>	g. Name and Address of Current Registered Agent					Γ		10. Name and Address of New Registered Agent					
SH	MOSE IRVI	NG				81	Name						
SHIMOFF, IRVING 200 S. BISCAYNE BLVD.						82	Street A	idress (P.O. Box Number is Not Acceptable)					
	IITE 1050 Ami FL 3313	1				83							
*****	WIII 1 E 0010	•				84	City		<b></b> 85	Zip (	Code		
						L			FL B	<u>L</u>			
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 agont, 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.											s registered registered		
SIGNATURE													
40	Signature, typed o		stered agent and title RS AND DIREC		(NOTE: Registere	d Age	ont signature re	equired when re-instating)  ADDITIONS/CHANGES TO OFFICER	C AND DID	CTOD	C IN 40		
12. TITLE	D	OFFICE	NO AND DINEC	DELE		Ti F	r	ADDITIONS/CHANGES TO OFFICER		hange	Addition		
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44 I baroby o	antifuthat the	information our	plind with this fi	lina dean nal a	salify for the ave		tion atotad	Lin Section 119 07/9Vi) Florida Statutos I furt	har andifu t	ant the	information		

I nereby certify that the information supplied with this filling 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 trusted 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.