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CORPORATION ANNUAL REPORT

1996

Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P94000029292 (7)

NEW WAVE RISING SUN ASSOCIATION INC.

Principal Place of Business Mailing Address 905 ATLANTIC AVE 905 ATLANTIC AVE OPA LOCKA FL 33054 OPA LOCKA FL 33054 3a. Date of Last Report 05/01/1995 3. Date Incorporated or Qualified 04/15/1994 4. FEI Number Applied For 2. Principal Place of Business 2a, Mailing Address 65-0484138 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5, Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation has liability for intangible tax under s 199.032, Country Z_{10} Yes No 30 Florida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ROLLE, VINCENT A 82 Street Address (P.O. Box Number is Not Acceptable) 905 ATLANTIC AVE OPA LOCKA FL 33054 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 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 object of points agent and the registered agent agent and the registered agent ag (NOTE Registered Agent signature required when reinstating) or printed name of registered agent and tills if applicative OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change 🛣 Addition 1. 1 TITLE THE Vice President ROLLE, VINCENT A CR2E034 1.2 NAME Oswald Sands 905 ATLANTIC AVE 1371 N.W. 173 Terr. Miami, Florida 33169 STREET LADDRESS 1.3 STREET ADDRESS OPA LOCKA FL 1.4 OITY-ST-ZIP $C(\Gamma \times \{S\}, Z(P)$ Addition Secretary Change DELETE 2 1 TITLE 101.5 DARVILLE, IAN Jacqueline Lightbourn 22 NAME NAMI 3051 N. W. 211 St. 15212 S BISCAIN DR 2.3 STREET ADDRESS STREET ADDRESS Carol City FL. 33054 N MIAMI FL 24 CITY - ST-ZIP Cun-S1-79 ☐ Change ☐ Addition DELETE 3 1 TITLE THUE LIGHTBORUN, GEORGE 3.2 NAME NAME 17411 N W 48TH AVE 3.3 STREET ADDRESS STREET ADDRESS Miami Fl 3 4 CITY - ST - ZIP CITY ST ZIP DELETE Change Addition 4.1 TITLE 1 11 £ Director ARMBRISTER, FLOYD 4.2 NAME NAMi Linda Lawson 1140 N W 141 STREET 4.3 STREET ADDRESS STHEE! ADDRESS 19112 N. W. 36 Ave. <u>Miami Florida 33056</u> Director n maiami fl 4 4 CITY - ST - ZIP CITY - ST - ZIP **K**} DELETE Change Addition 5 1 TITLE 101.4 MARIANNA PANIKA Marian man manakan manakan manaka MCKINNEY, RICHARD 5.2 NAME NAME 2155 N W 102 ST 5 3 STREET ADDRESS STREET ADDRESS MIAMI FL Minimixx Pixx Bol 50 5 4 CITY - ST- 2IP CHY-S1-ZIP Director Change ☐ Addition DELETE: 6 1 TITLE THE **Ernest Munroe** 6 2 NAME N.034

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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 apprears in Block 12 or Block 13 if change for an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

1341 N.W. 170 Terr.

Miami, FL. 33169

Vincent A. Rolle TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 13, 1996 (305) 229-6526

(12/95)