## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT Secretary of State  1996  DIVISION OF CORPORATIONS											
DOCUM	1ENT # P940	00062	2431	(9)							
	N PROPERTIES, INC.										
Principal Place of	of Business	Mailin	g Address					BINIT BRITE ABITE	98111 83119 8	(61 <b>6</b> 1686) A1886	10101 1481 1081
13700 PARK BLVEI, N. 13700 PARK BLVD. N SEMINOLE FL 34646 SEMINOLE FL 34646											
US	. 64440	US					3. Date Incorporated 08/19/1994	or Qualified		e of Last Rep 4/25/199	
. Principal Pla	ce of Business	2a. M	ailing Address		11.1	^ /	4. FEI Number		<u> </u>		polied For
1158			11580		khvest		65-051809	<u> </u>			ot Applicable
Suite, Apt. #	, etc. <b>2</b>	27] St	uite, Apt. #, etc	D. 			5. Certificate of Statu			Fee R	Additional equired
City & State	en FL	28 <b>∠</b>	ity & State	0	FL		Election Campaign     Trust Fund Contrib	ution	Ō.	Added	May Be to Fees
Zip /	Country	Zı	211.1		ountry		8. This corporation h			ax under s	199.032,
3464	14 25 USA		2764	7 30	US/F	<u> </u>	Florida Statutes  10. Name and Addre	Yes		Agent	
	9. Name and Address of Cu	rrent Register	ea Agent		81 Name		10. Maine and Addre	SS OF INCIT FO	og iotoi bu	7.90	
MCGAIN	CENE D				00 0	6 oleles	on IP O. Boy Number is	Not Acceptab	le)		
MCGAIN, GENE R 9978 LAKE SEMINOLE DR. WEST					82 Street Address (P.O. Box Number is Not Acce						
	LE FL 34643				83						
<b>4</b>					84 City					85 Zip	Code
	o the provisions of Sections 607.								FL	_ , ,	aictored office
SIGNATURE _	Signa ure, typed or printed name of registered OFFICERS	agont and title if appl	····		ered Agent signature	required	when reinstating) ADDITIONS/CHAN	IGES TO OFF			RS IN 12
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C:TY-SI-ZiP	by certify that the information sup	plied with this 6	lion is volunter	h. f. mainhaol a	s.4 City-St-ZiP and does not a	ualify fr	or the exemption stated	in Section 119	).07(3)(k), F	Florida Statu	tes. I further
certify that oath; that appears in	by certify that the information sup it the information indicated on this I am an officer or director of the in Block 12 or Block 13 inchanged	annual report orporation or t d, or on an atta	or supplement the receiver or chmeet with a	al annual rep trustee empo n <b>p</b> udress.	ort is true and owered to exec	accúra oute thi	ite and that my signature s report as required by C	shall have the chapter 607, F	e same leg lorida Stat	al effect as i lutes; and th	i made under at my name