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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

FILED

Mar 21 1997 8:00am

Secretary of State

Daylens Phone #

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400068947 (8)

**NELI BUSINESS, INC.** 

Principal Place of Business

SIGNATURE:

1611 N.W. 102 DRIVE 1611 N.W. 102 DRIVE CORAL SPRINGS FL 33071 CORAL SPRINGS FL 33071-3925 3. Date Incorporated or Qualified 3a. Date of Last Report 09/19/1994 06/10/1996 2. Principal Proce of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE 21 26 ✓ Not Applicable Suite, Apt. #. etc. Suite. Apr. # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 210 Zio Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RIBAK, AMI 1611 N.W. 102 DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL SPRINGS FL 33071 83 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 office or registered agent or polit in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Fare familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. proceedings, and presidence of regions of a percapit Contrapplismi (NOTE Registered Agent signature required when reinstating) 12. OF LICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE Change 160 1.1 TITLE GREENBAUM, NEIL MAME 1.2 NAME 1611 N.W. 102 DRIVE 518651 ADDRESS 13 STREET ADDRESS **CORAL SPRINGS FL 33071** 1.4 CITY - ST - ZIP 014 St 72 DELETE Change Addition 10:1 21 TITLE NAM 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS. 2 4 CITY-ST-ZIP T:15 S1-200 THE DELFTE 3 1 TITLE Change Addition NAME 3.2 NAME Short LAbridge. 3.3 STREET ADDRESS 34. CHTY-ST-ZIP DELETE Change Addition 4 1 TITLE 1.161 NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS Cay 51 20 4.4 CITY - ST - ZIP DELETE Change Addition 3811 51 JITLE 5 2 NAME STEEL ALDERS of 5.3 STREET ADDRESS OD: 51.78 54 CITY - ST - ZIP DELETE Change Addition h0.6 61 TITLE 6.2 NAME NAME STREET ALCOHOUS 63 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certly that the information supplied with this fring does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on the langual 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 Lam an officer or prector of the corporation or the receiver or trusple empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name ith an address.