

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000002559 (9)

1. Corporation Name

NATIONAL TROP-EX REALTY WEST, INC.



Principal Place of Business

12320 NW 18TH STREET
PEMBROKE PINES FL 33026

Mailing Address

12320 NW 18TH STREET
PEMBROKE PINES FL 33026

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

AUGELLO, ANNE L
16040 FEATHERSTONE WAY
DAVIE FL 33331

3. Date Incorporated or Qualified

01/10/1995

3a. Date of Last Report

4. FEI Number

65-0546236

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

Augello, Anne L.

82 Street Address, P.O. Box Number is Not Acceptable

4830 SW 63 Terr

83

Bldg 1, #113

84

DAVIE

FL

85

Zip Code
33314

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 of person performing the registration (must be the registered agent)

Signature of person performing the registration (must be the registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	AUGELLO, CARMEN J	
STREET ADDRESS	16040 FEATHERSTONE WAY	
CITY-STATE-ZIP	DAVIE FL 33331	
TITLE	VSD	☐ DELETE
NAME	AUGELLO, ANNE L	
STREET ADDRESS	16040 FEATHERSTONE WAY	
CITY-STATE-ZIP	DAVIE FL 33331	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PD	☒ Change ☐ Addition
2. NAME	Augello, Carmen J	
3. STREET ADDRESS	4830 SW 63 Terr Bldg 1, #113	
4. CITY-STATE-ZIP	DAVIE, FL 33314	
5. TITLE	VSD	☒ Change ☐ Addition
6. NAME	Augello, Anne L.	
7. STREET ADDRESS	4830 SW 63 Terr, Bldg 1, #113	
8. CITY-STATE-ZIP	DAVIE, FL 33314	
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

14. I do 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 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, or on an attachment with an address.

SIGNATURE:

Carmen J. Augello
Anne L. Augello

1/30/96 (954)433-0090
Date Daytime Phone #

CR2E034 (12/95)