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 # **P95000009644 (2)**

1. Corporation Name
NORCO GROUP, INC.

Principal Place of Business
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Mailing Address
TRUST SERVICES S.A.
BALBOA PLAZA. OFICINA 522. AVENIDA BALBOA
PANAMA CITY. REPUBLIC PANAMA
OC

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 02/06/1995
3a. Date of Last Report
4. FEI Number: 98-0151876 — 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

9. **Name and Address of Current Registered Agent**
AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 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, Typed or Printed Name of Registered Agent) (IN THE Registered Agent's signature, I certify that I am familiar) DATE

12. OFFICERS AND DIRECTORS

TITLE	P ☐ DELETE
NAME	BAILY, PETER R
STREET ADDRESS	343 ALMERIA AVENUE
CITY-ST-ZIP	CORAL GABLES FL 33134
TITLE	S ☐ DELETE
NAME	CORONADO, PEDRO
STREET ADDRESS	Balboa Plaza, Oficina 522, Ave. Balboa
CITY-ST-ZIP	Panama City, Republic of Panama
TITLE	T ☐ DELETE
NAME	TAPIA, MINERVA
STREET ADDRESS	Balboa Plaza, Oficina 522, Ave. Balboa
CITY-ST-ZIP	Panama City, Republic of Panama
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P ☐ Change ☐ Addition
1.2 NAME	BAILY, PETER R.
1.3 STREET ADDRESS	Balboa Plaza, Oficina 522, Avenida Balboa
1.4 CITY-ST-ZIP	Panama City, Republic of Panama
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	900001890356 ☐ Change ☐ Addition
6.2 NAME	-07/11/96--01013--013
6.3 STREET ADDRESS	***200.00
6.4 CITY-ST-ZIP	

CR2E034 (12/95)

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: PRESIDENT - PETER ROBIN BAILY — 12th March, 1996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #