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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P95000025500 (6) DOCUMENT #

NUR ENTERPRISES GROUP, INC.

Mailing Address Principal Place of Business 10306 DORCHESTER DRIVE 10306 DORCHESTER DRIVE **BOCA RATON FL 33134 BOCA RATON FL 33134** 3a. Date of Last Report 3. Date Incorporated or Qualified 03/30/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for Intangible tax under s 199.032, Country Zip Country Zip Yes No Florida Statutes 30 29 25 Name and Address of New Registered Agent 24 9. Name and Address of Current Registered Agent NUR SADIK I Address (P.O. Box Number is Not Acceptable)
306 DORCHESTER DA 82 AMERILAWYER 343 ADMERIA AVE. 83 RATON CORAL GABLES FL 33134 Zip Code 334-28 84 City 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 agont, 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. 4122/26 stered Agout signature required when reinstalling) of registered against and the is acceptable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1 TITLE THILE 1.2 NAME NUR. SADIK E NAME 1.3 STREET ADDRESS 10306 DORCHESTER DRIVE STREET ADDRESS 1.4 CITY-\$1 - ZIP **BOCA RATON FL 33134** Change Addition CITY-ST-ZIP () DELETE 2.1 TITLE TITLE 22 NAME NAME 23 STREET ADDRESS STREET AUDRESS 2.4 CITY-ST-ZIP ☐ Addition CITY - ST - 7IP Criange DELETE 3.11/HE TITLE

STREET ADDRESS 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 earth; 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. 6.4 CITY - ST- ZIP

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