FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000032389 (5)

FILED Mar 12 1998 8:00am Secretary of State

NOVA	Stores international, I	NC.			
Principal Plac	ce of Business	Mailing Address			!!! !! !!!!!!! !!!!!! !!!!!!! !!!!!
150 N U.S. HWY. ONE 9730 PINE MILL COURT SUITE 16 LAKE WORTH CITY FL 3 TEQUESTA FL 33469			3467	DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified	
			····	04/21/1995	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 973 Suite, Apt.	O PINE MILL COURT	Suite, Apt. #, etc.		65-0581515	Not Applicable
22	, w, etc	27		Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	E WORTH,	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zŧp	Country	Zιρ	Country	8. This corporation owes or has paid the c	
24 331			30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	d Agent
OH	IL, BRIAN ERIC		61 Name		
9730 PINE MILL COURT			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
[LA	KE WORTH FL 33467		\ <u>-</u>		
			83		
			84 City		85 Zip Code
	10			FI	
agent, I a	registered agent, or doin, in the State- am familiar with, and accept the obliga Signature, ground runned name of agestered ages	tions of, Section 607,0505, Fig	rida Statutes. Registered Agent signature require	poration submits this statement for the purpose tion's board of directors. I hereby accept the approximate when reinstaling? DATE	politinent as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	PD	☐ DELETE	11 TITLE		Change Addition
NAME	OHL, BRIAN E		1.2 NAME		
STREET ADDRESS	9730 PINE MILL COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL 33467	DELFTE	1.4 CITY - ST - ZIP		Change Addition
TITLE	TD	L. DECETE	21 TITLE		Change Change
NAME	OHL, ROBERT C		2.2 NAME		
STREET ADDRESS	113 E. INLET DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PALM BCH FL 33480	DELETE	2.4 CITY - ST - ZIP 3.1 TITLE	and the second s	Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-SI-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE	•	DELETE	6.1 TITLE	<u> </u>	Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

I hereby certify that the information supplied with this filing does not qualify on the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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 on an attachment with an address.

SIGNATURE:

561-965-9908