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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000044569 (8	OCUMENT #	P95000044569	(8)
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NEX, INC.

SIGNATURE

Principal Place of Business	Mailing Address
16706 134TH TERRACE NORTH JUPITER FL 36706	16706 194TH TERRACE NORTH JUPITER FL 33478-6070

FILED May 07 1997 8:00am Secretary of State



JUPITER FL	16706			ER FL 33478-607								
								3. Date Incorporated or Qualified 06/09/1995	3a. Da	ate of Le 06/19:		ort
2. Principal	Place of Business	3	2a. M	ailing Address			···	4. FEI Number		L	Appli	ed For
21			26					65-0586423			Not A	pplicable
Suite, Ap	I. #, etc.		27 St	uite, Apt. #, etc.				5. Certificate of Status Desired			75 Add 96 Requ	
City & Sta 23	ale		28	ity & State				Election Campaign Financing Trust Fund Contribution			.00 Ma	
7ıpı 24	25	Country	29	þ	30 Co.	intry	,	8. This corporation has liability for Florida Statutes	intangible] Yes [tayrund No	der s. 19	3 9.032,
	9. Name an	d Address of Curr	ent Register	ed Agent		L.,		10. Name and Address of New Re	gistered	Agent		
HE	RMAN, STEPHI	EN D				81	Name	•				
	01 EMBASSY D					82	Street Add	iress (P.O. Box Number is Not Acceptal	ole)			
W	est palm bea	CH FL 33401				83	<u></u>		· · · · · · · · · · · · · · · · · · ·			
						84	City			85	Zip Cod	de
						L.,			<u>FL</u>			
office or agent I	it to the provisions registered agent am familiar with,	s of Sections 607.08 ;, or both, in the Sta and accept the obli	te of Florida gations of, S	Such change w Section 607.0505	atutes, the transition and the state of the	d by tutes	e-named cor / the corpora s.	poration submits this statement for the pation's board of directors. I hereby acce	ourpose or pt the app	changi ointmer	ng ns reg	agistered gistered
SIGNATURE	Signatura by seld on p	rinted name of registered a			(NOTE Registe	d Age	ent signature requ	vired when reinstating)	DATE			
12.		OFFICERS A	NO DIRECTO		18			ADDITIONS/CHANGES TO OFFICE	ERS AND			
TITLE	PTD			DELETE		7LE				Cha	nge L	Addition
NAME	HERMAN, S	TEPHEN D			1.4	4ME	Į.					
STREET AUDRESS					1.3	PREET	ADDRESS					
CITY: ST-7/F		I BEACH FL 334	01				T-21P			-		
TITLE	VSD			☐ DELETE	2	TLE				Cha	nge L	Addition
NAME	HERMAN, J				2	AME	Į					
STREET ADDRESS					2	REET	ADDRESS					
CITY - ST - 71P	WEST PALA	A BEACH FL 334	01				ST-ZIP			reel"a.		
TITLE				☐ DELETE	•	itE				Cha	nge L	Addition
NAME					32 N	AME	- 1	حود ً	41			
STREET ADDRESS	6				335	TREET	ADDRESS		7 -			
CHY-ST-ZiP						JITY - S	ST-ZIP					
1.[LE				☐ DELETE	4.1 T	IYLE				Cha	nge L	Addition
NAME	-				4.21	MAME						
STREET ADDRESS	8				4.3 S	TREET	ADDRESS					
CITY-ST-ZIP	<u> </u>						T-ZIP					
TITLE				☐ DELETE	5.11	ΤŧΕ				Cha	nge L	Addition
NAME	1				5. N /	AME	ļ					
STREET ADDRESS	5				5. Si	TREET	ADDRESS					
CITY - S1 - ZIP					5. 00	TY-S	T-ZIP					
TILLE				DELETE	6. 11	TLE				Cha	nge [Addition
NAME					6 N	AME	l					
STREET ADDRESS	_s				6.381	TREET	ADDRESS					
CHY-ST-Zir	` {				,		T-ZIP					
44 Lele hor	sky carlify that th	o information europ	lied with this	filing does not c	nuality for the	EVO	motion state	ed in Section 119.07(3Vi). Florida Statute	c I further	certify	that the	

• Loo nereby certify that the information supplied with this hing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

GNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OF DIRECTO

180mhy 4/36/97