SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL RÉPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000057341 (6) APPROVED AND FILED

1997 AUG 18 PN 3: 21

SECRETARY OF STATE

1. Corporation	on Name NG TECH		,00071	541 (O	,					B.11. ##.m.			
Principal Place of Business Mailing Address									IE EUR INING MANG MANG BAGIN A		IMI F uruu iilli u i		
395 W. 10TH ST. 395 W. 10TH ST.													
SUITE 4 SUITE 4 HIALEAH FL 33010 HIALEAH FL 33010									DO NOT WRITE IN THIS SPACE				
			INALL	MITTE 00010			ŀ	3. Date Inco	orporated or Qualified		Date of Last F	Report	
								07/25/	1995		9/04/1996	'	
2. Principal F	Place of Busi	ness	2a. Ma	2a. Mailing Address				4. FEI Num	per			pplied For	
21			26					65-0	06098/6		N	ol Applicable	
Suite, Apt.	. #, etc.			Suile, Apt. #, etc.				5. Certificat	e of Status Desired	X		Additional equired	
City & Sta	te			City & State				C Floation (Paranaia - Flancia		 -		
23			<u> </u>	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip		Country	Zip		Countr	у	\neg		oration owes or has p	aid the cu			
24		25	29		30			Personal	Property Tax due Jun	e 30.	Yes [] No	
		and Address of Curr	ent Registere	d Agent	81	Υ		10. Name ar	d Address of New R	egistered	Agent		
MARTIN, RAUL R							A I	. ACEV	/EDO				
1330 W. 54TH ST.						OLGA L. ACEVEDO 82 Street Address (P.O. Box Number is Not Acceptable)							
APT. 212C						674	M	65 DRI	VE				
HIALEAH FL 33012						1							
						City		••		FL	85 Zip	Code 012	
11. Pursuant	to the provis	ions of Sections 607.05	02 and 607.19	508, Florida Statu	utes, the abov	HIA: re-named c	orpore	ation submits	this slatement for the	purpose o	of changing i	ts registered	
office or i agent. I a	registered ag am familiar w	ions of Sections 607.05 pert or both, in the Sta in, ag I accept the obli	te of Florida. S gations of, Sec	uch change was ction 607.0505, F	authorized b Florida Statute	y the corpo s.	oration	's board of di	rectors. I hereby acce	pt the ap	pointment as	registered	
SIGNATURE	4 /0	+JY											
10	Signature, ypec	or rinled name of registered a			Off: Registered Ag	ent signature re	эдилөб ү			DATE			
12.	PSTD	OFFICERS A	ND DIRECTOR	DELETE	13. 1.1 TITLE		PD		S/CHANGES TO OFFI	CERS AN	D DIRECTOR Change	RS IN 12	
NAME		, RAUL R		La beccie	1.2 NAME		ĀČI	EVEDO,	OLGA L.		Containge	L3 MOUIIIOII	
STREET ADDRESS		54TH ST., APT. 21:	ec.			ADDRESS	67	4 W 65	DRIVE			1:	
CITY-ST-ZIP		1 FL 33012			1,4 CITY-		HIZ	ALEAH,	FL 3301	2			
TITLE				DELETE	2.1 TITLE			· · · · · · · · · · · · · · · · · · ·	······································		Change	Addition	
NAME					2.2 NAME				,		-		
STREET ADDRESS	İ				2.3 STREE	T ADDRESS		3	000 02 2 -08/14/	267	313-	8	
CITY-ST-ZIP					2. 4 CITY-	ST-ZIP		1.5					
TITLE				DELETE	3.1 TITLE			* 0	****22	B. 75	ENWAS:	Abdition	
NAME					3.2 NAME								
STREET ADDRESS					3.3 STREE	ADDRESS			,				
CITY-ST-ZIP				DELETE	3.4. CITY-	ST-ZIP	····						
TITLE				☐ DELETE	4.1 TITLE						Change	L Addition	
NAME					4. 2 NAME				•				
STREET ADDRESS					4.3 STREET								
CITY-ST+ZIP TITLE				DELETE	4.4 City - 5	SI-ZIP		·			Change	Addition	
NAME				>	5.1 TITLE 5.2 NAME						CHI Origing C	L. Addition	
STREET ADDRESS					5.3 STREET	ADDRESS							
CITY-ST-ZIP					5.4 CITY-5	- 1			*1			\sim \perp	
TITLE				DELETE	6.1 TITLE						Change	Addition	
NAME					6.2 NAME				•		ЛH	* h 7	
STREET ADDRESS					6.3 STREET	ADDRESS					~ K	19/1	
CITY-ST-ZIP					6.4 CITY-S						99,	<i>γο</i> .	

14. I do hereby certify that the information supplied with this filing 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 or attachment with an address.

8-11-97