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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000064279 (9)

NORVENT II CORPORATION

Principal Place of Business

2. Principal Place of Business

Mailing Address

10352 SW 113TH ST MIAMI FL 33176

SIGNATURE:

10352 SW 113TH ST MIAMI FL 33176

2a. Mailing Address

FILED Feb 11 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualified

Feb 4, 1998

/305)256-997/

08/18/1995 4. FEI Number

65-0618558

22	Suite, Apt. #, etc.					Suite, Apt. #, etc.					6.	Certificate of Status I	Desired		\$8.75 / Fee Re		
23	City & State				City & State							Election Campaign F	-		\$5.00 Added t		
<u> </u>	Zŧρ	ip Country						Country			8.	This corporation owe		aid the cu			
24		25			28	30						Personal Property Ta] No	
9. Name and Address of Current Registered Agent							81 Name				10.	Name and Address	of New Ro	egistered	Agent		
STERN, RONALD K CPA									Name	Э							
3211 PONCE DE LEON BLVD, SUITE 305									Stree	1 Addre	ss (P	P.O. Box Number is No	ot Accepta	blei			
CORAL GABLES FL 33134														,			
									84 City FL 85 Zip Code								
1	Pursuant (to the provis	sions of Section	ns 607 0502 ar	vd 607	1508. Florida Statu	bove	-nama	d corpo	ratio	on submits this stateme	ent for the	nurnose (of changing its	s registered		
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.															registered		
!															P		
S	GNATURE	Sign it is type	d or printed name of			ppl cable (NO	ed Age	d Agent signature required when reinstating) DATE									
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14	indicated officer or of	on this arm director of th	ual report or su he corporation if changed, or	ipplemental an or the receiver on an attachm	nual re or trus ent wit	port is true and ac stee empowered to h an address	curate ar	id tha	at my si	gnature	sha	on 119.07(3)(i), Florida all have the same legal by Chapter 607, Florid	l effect as i	f made u	nder oath: tha	itlam an	
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