

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathiam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000073671 (6)

1. Corporation Name

ECHO NBM REALTY, INC.



Principal Place of Business

12520 N.W. 160TH STREET
REDDICK FL 32686

Mailing Address

12520 N.W. 160TH STREET
REDDICK FL 32686

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

FREED, OWEN S
2200 MUSEUM TOWER
150 WEST FLAGLER STREET
MIAMI FL 33130

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

09/22/1995

3a. Date of Last Report

4. FET Number

65-0446326

Applied for
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Signature of person changing principal place of business

Signature of person changing registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
BERAHA, NIKOLA
12520 N.W. 160TH STREET
REDDICK FL 32686

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

15 TITLE

16 NAME

17 STREET ADDRESS

18 CITY-ST-ZIP

19 TITLE

20 NAME

21 STREET ADDRESS

22 CITY-ST-ZIP

23 TITLE

24 NAME

25 STREET ADDRESS

26 CITY-ST-ZIP

27 TITLE

28 NAME

29 STREET ADDRESS

30 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

35 TITLE

36 NAME

37 STREET ADDRESS

38 CITY-ST-ZIP

39 TITLE

40 NAME

41 STREET ADDRESS

42 CITY-ST-ZIP

43 TITLE

44 NAME

45 STREET ADDRESS

46 CITY-ST-ZIP

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SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/96 (352) 591-2395

CR2E034 (12/95)