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Mar 31 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000088176 (9)

1. Corporation Name
NEW CENTURY INC.



Principal Place of Business
1800 NORTH 46TH AVENUE
HOLLYWOOD FL 33021

Mailing Address
1800 NORTH 46TH AVENUE
HOLLYWOOD FL 33021-4116

3. Date Incorporated or Qualified 11/16/1995	3a. Date of Last Report 05/01/1996
4. FEI Number 65-0636002	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. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent
~~DADE COUNTY CORPORATE AGENTS, INC. =~~
~~ATTN: ALAN L. LEWIS ---~~
~~20801 BISCAYNE BLVD., SUITE 505 ---~~
~~AVENTURA FL 33180 -----~~

10. Name and Address of New Registered Agent	
81 Name BARBARA DUBIN	
82 Street Address (P.O. Box Number is Not Acceptable) 1800 NORTH 46th Avenue	
83	
84 City HOLLYWOOD	85 Zip Code FL 33021

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: *Barbara A. Dubin* PRES BARBARA A. DUBIN 3/24/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PSTD ☐ DELETE
NAME	DUBIN, BARBARA A
STREET ADDRESS	1800 NORTH 46TH AVENUE
CITY- ST- ZIP	HOLLYWOOD FL 33021
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

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 on an attachment with an address.

SIGNATURE: *Barbara A. Dubin* 3/24/97 (954) 987-8914
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)