

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER 7/1/99.
AMOUNT DUE ON OR BEFORE 6/7/99: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

96 NOV -7 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000093318 (0)

1. Corporation Name

EDMOND S. NORKUS INC.

Principal Place of Business

Mailing Address

1205 HILLSBOROUGH MILE, #101
HILLSBORO BEACH FL 33062

1205 HILLSBOROUGH MILE, #101
HILLSBORO BEACH FL 33062

REINSTATEMENT 96

3. Date Incorporated or Qualified
12/07/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
#101

2a Suite, Apt. #, etc.
#101

23 City & State

2a City & State

24 Zip

25 Country

2a Zip

2a Country

4. FEI Number

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NORKUS, EDMOND S
1205 HILLSBOROUGH MILE, #204
HILLSBORO BEACH FL 33062

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 607.7508, 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10-30-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME NORKUS, EDMOND S
STREET ADDRESS 1205 HILLSBOROUGH MILE, #101
CITY-ST-ZIP HILLSBORO BEACH FL 33062

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
500002003985
-11/14/96--01009-016
***383.75 ***383.75

TITLE VP
NAME KAREN SEBOSO-NORKUS
STREET ADDRESS 1205 HILLSBOROUGH MILE #101
CITY-ST-ZIP Hillsboro Beach, FL 33062

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(h), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

10-1

(954) 570 9935