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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000018940 (2)

NORDIC GLOBAL, INC.

## **FILED** Feb 17 1997 8:00am Secretary of State

0: 10			·····					
Principal Place of Business Mailing Address						1 AMOUNT AIR ANNI BILL DOING EDILL BRILL	48181 11891 1941 <b>5</b> 18111 9	1011 0011 1501
100 N BISCAY! MIAMI FL 3313	ne blyd 30th blyd 2	100 N BISCAYNE BLVD MIAMI FL 33132	100 N BISCAYNE BLVD 30TH BLVD MIAMI FL 33132					
						3. Date Incorporated or Qualified 02/28/1996	3a. Date of Las	l Report
2. Principal P	lace of Business	2a, Mailing Address				4. FEI Number		Applied For
21		26			······································	65-06-1751	3	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired Fee Required		
City & State	E	City & State				6. Election Campaign Financing \$5.00 May Be		
<b>23</b>   Zip	Country	<b>28</b> Zip	Co	inter		Trust Fund Contribution		d to Fees
24	25 29		Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
<u> </u>	g Name and Address of Current		[30]	1		10. Name and Address of New Reg		
HEV	DASCH, AXEL			81	Name	10,	incoros regoni	······································
	N BISCAYNE BLVD 30TH BLVD							
	MI FL 33132			82	Street Add	ress (P.O. Box Number is Not Acceptable	e)	
MIN	MI FL 33132			83				
	_	/	•	84	City		FL 85 Z	ip Code
11 Pursuant	to the provisions of Sections 607,9502	and 6021508. Floring State	utes the a	hove	a-named cou	povation submits this statement for the n		n ite registered
office or re	egistered agent, or both, it the State	of Florida. Such change was	authorize	d by	the corpora	poration submits this statement for the pution's board of directors. I hereby accep	t the appointment	as registered
	ri Tarrillar With, and accept the obliga	ilons of, section puz dous, i	riorida Sta	lutes	j.	12-0	14 9	Z
SIGNATURE	Signature vyered or provide provide registered ager	I and title if applicable. (No	OTF: Bacustere	d Ana	nt signature regué	ired when reinstating)	DATE	
12.	OFFICERS AND		13.		in a product to do	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	PTD	DELETE	1.1 Ti	ITLE	<u> </u>		☐ Chang	
NAME	KRUSE, DIETER		1.2 N	IAME				
STREET ADDRESS	1200 HILLSBORO MILE #1		1,3 \$	TREET	ADDRESS			
CITY - ST - ZIP	HILLSBORO BEACH FL 33062		14.0	ITY-S	T- 71P			
TITLE	VSD	DELETE	211				☐ Chang	e Addition
NAME	KRUSE, HOLGER		2.2 N	AME				
STREET ADDRESS	12006 COED DRIVE		2.3 \$	TREET	ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32826		2.40	CITY-S	ST-ZIP			
TITLE		☐ DELETE	3.1 T	ITLE			Chang	e Addition
NAME			32 N	AME				
STREET ADDRESS			3.3 \$	TREET	ADDRESS			
CITY - ST - ZIP			34.0	OTY-S	IT-ZIP			····
TITLE		☐ DELETE	4.1 TI	ITLE			Chang	e Addition
NAME			4.21	IAME				
STREET AUDRESS			4.3 \$	TREET	ADDRESS			
CITY-ST-ZIP				ITY-S	T-ZIP			····
TITLE		☐ DELETE	5.1 T				Chang	e 🔲 Addition
NAME			5.2 N					
STREET AODRESS			5.3 S	TREET	address			
CITY-ST-ZIP				iTY-S	T-ZIP	***************************************	——————————————————————————————————————	
TITLE		☐ DELETE	6.1 Ti				Chang	e Lii Addition
NAME			6.2 N		}			
STREET ADDRESS					address			
CHTY-ST-7IP	and the state of t	with this tiles. He are an		iTY-S		d = 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0 = 0 =	LY SALVE SIZE	
informatio	by certify that the information supplied in indicated on this annual report or si fficer or director of the corporation of h Block 12 or Block 13 if changed or,	ipplemental annual report is the receiver or trustee empo	true and a wered to a	exec exec	rate and that ute this repo	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal rt as required by Chapter 607, Florida St	. I further certify the effect as if made a stutes; and that m	at the under oath; that y name

TURE AND TWEE ON PRINTED HAME OF SIGNING OFFICER OR DIRECTOR