

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

FILED
Jun 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000024152 (6)

1. Corporation Name
NEXSTORE 1, INC.



Principal Place of Business C/O STEVE I. SILVERMAN, ESO. 201 S. BISCAYNE BLVD., 1970 MIAMI CENTER MIAMI FL 33131	Mailing Address C/O STEVE I. SILVERMAN, ESO. 201 S. BISCAYNE BLVD., 1970 MIAMI CENTER MIAMI FL 33131
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2255 GLADES RD Suite, Apt. #, etc. 22 SUITE 219A City & State 23 BOCA RATON, FL Zip 24 33431 Country 25 USA	2a. Mailing Address 26 2255 GLADES RD Suite, Apt. #, etc. 27 SUITE 219A City & State 28 BOCA RATON, FL Zip 29 33431 Country 30 USA
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3. Date Incorporated or Qualified 03/13/1996	4. FEI Number 65-0766304 Applied For ☒ 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 owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

SILVERMAN, STEVE I
C/O KLUGER, PERETZ, KAPLAN & BERLIN, P.A.
201 S. BISCAYNE BLVD., 1970 MIAMI CENTER
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name WILLIAM L. KNIGHT	82 Street Address (P.O. Box Number is Not Acceptable) 2255 GLADES RD	83 SUITE 219A	84 City BOCA RATON	85 FL	86 Zip Code 33431
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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 William L. Knight WILLIAM L. KNIGHT 2/4/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	KNIGHT, WILLIAM L	
STREET ADDRESS	2255 GLADES RD., STE. 219A	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	VP	☒ DELETE
NAME	BERKLEY, RONALD S	
STREET ADDRESS	2255 GLADES RD., SUITE 219A	
CITY-ST-ZIP	BOCA RATON FL 33431	
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	DIRECTOR, CHAIRMAN, PRESIDENT, CEO	☒ 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	Vice President	☐ Change ☒ Addition
4.2 NAME	MARK SCHREIBER	
4.3 STREET ADDRESS	2255 GLADES RD., SUITE 219A	
4.4 CITY-ST-ZIP	BOCA RATON, FL 33431	
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 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 William L. Knight WILLIAM L. KNIGHT 2/4/98

CR2E034 (10/97)