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 # P9600029646 (2) FIRST ATLANTIC PROJECT DEVELOPMENT CORPORATION

Principal Place of Business 3700 AIRPORT ROAD #307 BOCA RATON FL 33431 Mailing Address

3700 AIRPORT ROAD #307 BOCA RATON FL 33431-6409

FILED May 12 1997 8:00am Secretary of State



544. 1011611						
						3. Date Incorporated or Qualified 3a. Date of Last Report 04/04/1996
	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26			·	65-0725420 Not Applicable
Suite, Apt. (#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29	Zip Country		· · · · · · · · · · · · · · · · · · ·	
571	g. Name and Address of Curren		1301	γ		10. Name and Address of New Registered Agent
FILE	NGS, INC.			81	Name	
			82 Street Address (P.O. Box Number is Not Acceptable)			
3732 N.W. 16TH STREET FORT LAUDERDALE FL 33311					Street	Address (P.O. Box Number is Not Acceptable)
				83		
				84	City	FL 85 Zip Code
SIGNATURE						corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered age			d Age	nt signature	c required when reinstating) DATE
12.	OFFICERS ANI	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	GROSS, HARRY	ניין מנוגונ	1.1 11			Change L Addition
NAME	3700 AIRPORT ROAD #307		1.2 N		45.500con	
STREET ADDRESS	BOCA RATON FL 33431		1		ADDRESS (
CITY-ST-ZIP TITLE	2000 1000011111111111111111111111111111	DELETE	2.1 1		1-2(P	Change Addition
NAME			2.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP					ST - ZIP	
TITLE		DELETE			· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			3.2 N	AME	}	
STREET ADDRESS			3.3 \$	TREET	ADDRESS	
CITY-ST-ZIP			3.4 0	HY-5	S1-ZIP	
TITLE	_	☐ DELETE	4.1 11	ITLE		Change Addition
NAME			4.21	NAME	ľ	
STREET ADDRESS			4.3 S	IREET	ADDRESS	
CITY-ST-ZIP					1-21P	
TITLE		☐ DELETE	5.1 19			☐ Change ☐ Addition
NAME			5.2 N			
STREET ADDRESS			1		ADDRESS	
CITY-ST-ZIP		T BELLEV		IIY-S	T - ZIP	
TITLE		☐ DELETE	611		{	Change Addition
NAME			6.2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP	and the state of t	al matter than them		ITY-S		Delegad in Continue 440 07/09/3 Florida District 14 and 1 and 2 and 2 and 2
Information	n indicated on this annual report or s	supplemental annual report is rithe receiver or trustee empo	s true and a owered to e	accu	irate and	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the d that my signature shall have the same legal effect as if made under oath; tha report as required by Chapter 607, Florida Statutes; and that my name