

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

FILED
Aug 26 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 # P96000059232
1. Corporation Name
NEWPORT BUSINESS MGMT. CORP

Principal Place of Business
4200 NW 16th St
Penthouse A
Lauderhill Florida 33313

Mailing Address
Same

| | |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21 4200 NW 16th St | 26 Same |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| 22 Penthouse A | 27 |
| City & State | City & State |
| 23 8. Lauderdale FL | 28 |
| Zip | Country |
| 24 33313 | 29 |
| Country | 30 |
| 25 Broward | |

| | |
|---|---|
| 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| July 15, 1996 | N/A |
| 4. FEI Number | Applied For |
| 65-0708892 | Not Applicable |
| 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| <input type="checkbox"/> | |
| 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| <input type="checkbox"/> | |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

9. Name and Address of Current Registered Agent
Theodore Becker
7800 W. Oakland Park Blvd
Suite 107C
Sunrise FL 33351

| |
|---|
| 10. Name and Address of New Registered Agent |
| 81 Name Jeffrey A. Licker |
| 82 Street Address (P.O. Box Number is Not Acceptable) |
| 4200 NW 16th St |
| 83 Penthouse A |
| 84 City Sunrise |
| 85 Zip Code 33313 |

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 Jeffrey A. Licker 8/20/97

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------------|---|-----------------------------|
| TITLE | THEODORE BECKER | 1.1 TITLE | DIRECTOR / D.P./SEC. |
| NAME | THEODORE BECKER | 1.2 NAME | JEFFREY A. LICKER |
| STREET ADDRESS | 7800 W. OAKLAND PARK BLVD | 1.3 STREET ADDRESS | 4200 NW 16th St Penthouse A |
| CITY-ST-ZIP | SUNRISE FL 33351 P/O | 1.4 CITY-ST-ZIP | LAUDERHILL FL 33313 |
| TITLE | | 2.1 TITLE | DIRECTOR / PRESIDENT |
| NAME | | 2.2 NAME | DAVID BRAUSER |
| STREET ADDRESS | | 2.3 STREET ADDRESS | 4200 NW 16th St Penthouse A |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | LAUDERHILL FL 33313 |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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: Jeffrey A. Licker Dir./V.P./Sec 8/20/97 954-730-2100

CR2E084 (9/96)