

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000094367

1. Corporation Name

NEW DIMENSIONS INTERNATIONAL, INC.

Principal Place of Business

7081 N.W. 8TH COURT
PLANTATION FL 33313

Mailing Address

7081 N.W. 8TH COURT
PLANTATION FL 33313

FILED
Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90033 041 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/19/1996

4. FEI Number

65-0704322

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 the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

COMPANY AGENT, INC.
111 SOUTHWEST 5TH AVE., STE. 200
MIAMI FL 33130-1381

10. Name and Address of New Registered Agent

81 Name

MAY S. KAPISH

82 Street Address (P.O. Box Number is Not Acceptable)

1655 NW 91st Street 5-14

83

84 City

Coral Springs

FL

85 Zip Code

33071

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

May S. Kaph

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
P
HOFFMAN, RUSSEL M JR.
STREET ADDRESS
7081 N.W. 8TH COURT
CITY-ST-ZIP
PLANTATION FL 33313

TITLE ☐ DELETE

NAME
VPS
KAPISH, MAY S
STREET ADDRESS
1842 TAMARIN LAKE
CITY-ST-ZIP
COCONUT CREEK FL 33066

TITLE ☐ DELETE

NAME
T
HOFFMAN, RUSS
STREET ADDRESS
7081 N.W. 8TH COURT
CITY-ST-ZIP
PLANTATION FL 33313

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 ☐ 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 ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/99

Date

954 3271315

Daytime Phone #

CR2E034 (1/98)