

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

FILED
Jun 01 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 #

1. Corporation Name:

NICOLE DEAN INC.

P970000000238

Principal Place of Business:

Mailing Address:

802 SW 7TH TERRANCE
HALLANDALE, FL 33009

(SAME)

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

JAN 2 1997

4. FEI Number

65-0715826

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

2. Principal Place of Business:

2a. Mailing Address:

21 802 S.W. 7 TERRACE

22 Suite, Apt. #, etc.

23 City & State:

HALLANDALE,

24 Zip

FL 33009

Country

USA

26 City & State:

27 HALLANDALE, FL.

28 Zip

33009

Country

USA.

9. Name and Address of Current Registered Agent

Richard Monella
802 SW 7 Terr.
Hallandale FL 33009

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Richard Monella

Richard Monella

4-21-98

Signature (owner, president, or other person in control of the corporation) (NOT a Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	12a	Richard Monella	☐ DELETE
NAME			
STREET ADDRESS		802 SW 7th Hallandale	
CITY-STATE-ZIP		FL 33009	

TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			

TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			

TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			

TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-ZIP			

TITLE			☐ DELETE
NAME			
STREET ADDRESS			
CITY-STATE-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-STATE-ZIP		

2.1 TITLE	☐ Change	☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-STATE-ZIP		

3.1 TITLE	☐ Change	☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		

4.1 TITLE	☐ Change	☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		

5.1 TITLE	☐ Change	☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		

6.1 TITLE	☐ Change	☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 of this filing, or on an attachment with an address.

SIGNATURE:

Richard Monella

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/97 954-458-9549

CR2E034 (10/97)