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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000004433 (3)

NANI MAKA ENTERPRISES, INC.

FILED May 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					f inditinds ten torit inder botte dette dette dette dette bille bilde titen fill indi		
2206 NE 17TH CT 2206 NE 17TH CT							
FT LAUDERDA	ALE FL 33305	FT LAUDERDALE FL 33305			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	
						01/16/1997	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21 + + 4	ruderdale + la	26 A Bove				Not Applica	ble
Sulte, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional	
	ove	27 City P Cycle				Fee Hequired	
City & State	В	City & State				6. Election Campaign Financing \$5.00 May Be	-
Zip	Country	Zip Country				Trust Fund Contribution	
24	25	29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
**1	9. Name and Address of Curre					10. Name and Address of New Registered Agent	\dashv
MA	ISEL, GARY S			81	Name		\neg
600 \$ ANDREWS AVE, SUITE 600				82	Ctrack Ad	ddrogo (D.O. Doy Number in Net Appealable)	\dashv
	LAUDERDALE FL 33301			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)	- 1
				83			
				84	City	FL 85 Zip Code	\neg
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the a	LL bove	-named co		ed
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 Signature types as protections of the structure and taken approals (NOTE: Registered Agent signature required when reinstating) DATE ONTE							
				d Ager	nt signature ret	equired when reinstating) DATE	\exists
12. TITLE	D OFFICERS AN	ID DIRECTORS 13. DELETE 1.11				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ina
NAME	MALONEY, NANI					C Grange C Audin	
STREET ADDRESS	2206 NE 17TH CT		1	1.2 NAME 1.3 STREET ADDRESS			
CITY-ST-ZIP	ET I ALIDEONALE EL 2020E			TY-ST	1		- 1
TITLE	D	DELETE	DELETE 21 TI		- 217	Change Addit	ion
NAME	MALONEY, HUGH T		22 N/		i		
STREET ADDRESS	2206 NE 17TH CT			2.3 STREET ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33305			ITY-S	[ĺ
TITLE		DELETE	3,1 TU	~	, <u> </u>	Change Addit	ion
NAME		•	3,2 NAME				
STREET ADDRESS			1		ADDRESS		l
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change Addit	ion
NAME			4. 2 NAME				-
STREET ADDRESS			4.3 ST	REETA	ADDRESS		-
CITY-ST-ZIP			4.4 CITY - 5		- ZIP		
TITLE		DELETE	5.1 TITLE			Change Addit	ion
NAME			5.2 NAME				
STREET ADDRESS			5.3 ST	REET A	ADDRESS		- [
CITY-ST-ZIP			5.4 CI	TY-ST	- ZIP		_]
TITLE		DELETE	6.1 TII	ΓLE		Change Addit	ion
NAME			6.2 NA	AME			
STREET ADDRESS			63 ST	REET A	ADDRESS		
CITY-ST-ZIP				TY - ST			
3.4 I horoby o	Assure that the information consisted a	uit. Itio filoso doco nat audifu for	- 460		on assessi	in Section 118 07/2VI) Florida Statutos I further certify that the information	

receipt 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 supplied 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.