

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 # P97 000006835

1. Corporation Name

NATIONAL S & L INC.

Principal Place of Business

Mailing Address

7845 W SAMPLE ROAD  
CORAL SPRINGS FL 33065-4709 RT4

2. Principal Place of Business

2a. Mailing Address

21 7845 W SAMPLE RD

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 CORAL SPRINGS FL

28

Zip

Country

Zip

Country

24 33065

25 BRAVANA

29

30

9. Name and Address of Current Registered Agent

CHARLES SONORA  
11408 NW 20 DR  
CORAL SPRINGS FL 33071

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

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 CHARLES SONORA  
STREET ADDRESS 11408 NW 20 DR  
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ DELETE

NAME BRAUNSTEIN STEPHANIE  
STREET ADDRESS 4059 COCONUT CREEK CIR  
CITY-ST-ZIP COCONUT CREEK FL 33063

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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.

SIGNATURE:

Sondra Charles

10/28/98

FILED

98 OCT 29 AM 11:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

1/23/97

4. FEI Number

450752408

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

**National S & L Inc**

#7845 W Sample Road  
Coral Springs FL 33065

Phone 954 344 0777

2

October 28, 2000

Florida Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee FL 32314

Dear Secretary,

I am writing to request that you reinstate my corporation at the current Annual Report Fee as I did not receive the renewal notice. I just became aware of the problem when I was set to close on the sale of property. I would greatly appreciate your waving all penalties and expediting this renewal form.

Sincerely,

  
Stephanie Braunstein