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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000018287 (7)

NEW WAYS ASSOCIATES, INC.

Principal Place of Business	Mailing Address
118 NW 5TH ST	118 NW 5TH ST
FT LAUDERDALE FL 33311	FT LAUDERDALE

FILED

Apr 17 1998 8:00am Secretary of State



NW 5TH ST AUDERDALE FL 33311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/26/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Ζıp Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHUCK MOGBO, P.A. 2331 N STATE RD 7, SUITE 124 Street Address (P.O. Box Number is Not Acceptable) LAUDERDALE FL 33313 83 84 City Zip Code 85

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 hoth, 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 pented name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DELETE	1.1 TITLE	. Change Addition	
NAME	TARASOV, VALERIY	1.2 NAME		
STREET ADDRESS	118 NW 5TH ST	1.3 STREET ADDRESS		
CHTY-ST-ZIP	FT LAUDERDALE FL 33311	1.4 CITY-ST-ZIP		
TITLE	DELETE	2.1 TITLE	Change Addition	
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2 4 CITY-ST-ZIP		
TITLE	DELETE	31 TITLE	Change Addition	
NAME		3.2 NAME	、	
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4 1 TITLE	Change Addition	
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS	·	
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
THILE	DELETE	51 TITLE	Change Addition	
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS	İ	
CITY - ST - 7IP		5.4 CITY-ST-ZIP		
TIFLE	DELETE	6.1 TITLE	Change Addition	
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - ZIP		

14. 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 suppliemental 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:

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