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

Mailing Address

MIAMI FL 33186

2a. Mailing Address

City & State

Ζip

Suite, Apt. #, etc.

26

27

28

12311 SW 106 STREET

**PROFIT** CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

JONES, CHARLES L 9900 SW 168TH STREET

SUITE #9

**MIAMI FL 33157** 

Suite, Apt. #, etc.

City & State

12311 SW 106 STREET

MIAMI FL 33186

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Zip

CITY-ST-ZIP



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

P97000026264 (6) DOCUMENT #

Country

9. Name and Address of Current Registered Agent

Block 12 or Block 13 if changed, or on an attachment with an address.

N & N INTERNATIONAL, INC.

## Secretary of State DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>03/24/1997</u> Applied For Not Applicable \$8.75 Additional П 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Zip Code DATE Change Addition

**FILED** 

Jan 20 1998 8:00am

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, typicd or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE GOSINE, NARESH 1.2 NAME NAME 12311 SW 106 STREET STREET ADDRESS 1.3 \$1REE1 ADDRESS MIAMI FL 33186 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 HILE GOSENE, NARESH NAME GOSINE, NASRESH 12311 SW 1065T 12311 SW 106 STREET 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** MEAMI, FL 33186 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition 3.1 TITLE TITLE GOSTNE, NADINE 12311 SW 1065T GOSINE, NASRESH NAME **3.2 NAME** 12311 SW 106 STREET 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33186** MIMMI, FL 33186 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE GOSINE, NARESH 4. 2 NAME NAME 12311 SW 106 STREET STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL 33186** 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CHY-ST-ZIP

14. Thereby 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

NADOGU C

ilelao

Country

81

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84 City

Name

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