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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P97000030638 (5) DOCUMENT #

NOVA CONCEPTS, INC.

FILED Apr 16 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					
			3750 SARAH BROOK C				
JACKSONVILLE FL 32277 JACK			JACKSONVILLE FL 322	CKSONVILLE FL 32277			DO NOT WINTE IN THE ORACE
							DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
9 Principal F	Place of Business	1 35	Mailing Address				04/03/1997
2. Principal Place of Business			⊢				4. FEI Number QUI (91400) Applied For
Suite, Apt	# 616	26]	Suite, Apt. #, etc.				Not Applicable
	w, etc.	 1					5. Certificate of Status Desired \$8.75 Additional
City & Stat	20	27	City & State				Fee Required
23		-	¬ ′				6. Election Campaign Financing \$5.00 May Be
Zip	Country	28	Z _I D Country				Trust Fund Contribution Added to Fees
24	— ·		Zip	⊢	rigry		8. This corporation owes or has paid the current year Intangible
24	26 29 30 30 9. Name and Address of Current Registered Agent		[30]			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
					81	Name	TO, Hairie and Address of New Registered Agent
	BROWNLEE, VERNON H					1401110	
3750 SARAH BROOK COURT					82 Street Address (P.O. Box Number is Not Acceptable)		
J#	ACKSONVILLE FL 32277						
					83		
				ł	84	City	85 Zip Code
						•	FL T T
11. Pursuant	to the provisions of Sections 607.09	502 and 6	07.1508, Florida Statu	tes, the at	ove	-named corp	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered
agent. I a	im familiar with, and accept the obl	igations of	f, Section 607.0505, Fi	lorida Stat	utes	rine corporat s.	tions board or directors. I hereby accept the appointment as registered
SIGNATURE		-					
OIGITATOTIE	Signature, typed or printed name of registered a	gent and title	il applicable. (NO	TE: Registered	Age	nt signature requir	red when reinstating) DATE
12.	OFFICERS A	ND DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D PRESIDENT		☐ DELETE	1.1 10	LE	/	PCLS I DENT
NAME	BROWNLEE, VERNON H			1.2 NA	ME		
STREET ADDRESS	3750 SARAH BROOK COU	RT		1.3 ST	REET	ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32277			1.4 CII	ry-s	T-ZIP	
TITLE	D		DELETE	2.1 TIT	LE	7	DICE PRETIDENT ME Change Addition
NAME	Bramble, Timothe R			2.2 NA	ME		
STREET ADDRESS	19120 TRAILVIEW			2.3 ST	REET	ADDRESS	
CITY-ST-ZIP	SAN ANTONIO TX 78258			2. 4 Ci		į.	
TITLE	_		DELETE	3,1 TIT			CFO Addition
NAME	1		_	3.2 NA		×	HUMAS J. GRAHAM
STREET ADDRESS	·			•		ADDRESS 3	SON AND BROOKE CIR 4108
CITY-ST-ZIP						7 7ID	GFO GRAHAM Change Maddition HOMAS J. GRAHAM CIR 4108 LONGWOND, FL 32779
TITLE			DELETE	3.4. CI 4.1 TIT		n-zir	
NAME			- Detter	4.2 N/			C. c.willing C. Montton
STREET ADDRESS				1		ADDRESS	
CITY-ST-ZIP			Decem	4.4 CIT		T-ZIP	
TITLE			DELETE	5.1 TIT			Change Addition
NAME				5.2 NA			
STREET ADDRESS				5.3 \$T	RÉET	ADDRESS	
CITY-ST-ZIP				5.4 CIT	Y-\$	T-ZIP	
TITLE		•	DELETE	6.1 TiT	LE]	Change Addition
NAME				6.2 NA	ME	1	
STREET ADDRESS				6.3 ST	REET	ADDRESS	
CITY-S1-ZIP				6.4 CIT	Y- S1	T-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 cath; 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