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 # 1. Corporation Name P97000032137 (6)

N.O.C. COMMUNICATIONS, INC.

FILED May 15 1998 8:00am Secretary of State



4/22/90

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Principal Place	e of Business	Mailing Address			48 11(18 11961 11886 11111 1881 1981
13356 N.W. BTH LANE MIAMI FL 33182		13356 N.W. 8TH Lane Miami Fl 33182		DO NOT WRITE IN T	THI S S PACE
				3. Date Incorporated or Qualified	
			•	04/09/1997	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65.0746175	Not Applicable
Sulte, Apt. 22 570 [SW 130th pl.	Suite, Apt. #, etc.	N 130th pl	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	21	6. Election Campaign Financing	\$5.00 May Be
23 MI		28 M170m1		Trust Fund Contribution	
Zip 	Country	7p	Country	This corporation owes or has paid th	
24 371	25 25 Name and Address of Currer		30	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
		it negistered Agent	81 Name	10. Name and Address of New Registe	area Agent
	RIQUEZ, NORMAN_		J. Mairie		
	58 N.W. 8TH LANE		82 Street Ad	idress (P.O. Box Number is Not Acceptable)	
MIA	MI FL 33182		83	101 SW 180m pu	MCC.
			83		
			84 City	1 · ·	85 Zin Code
~ <u>/ ' </u>			<u></u>		FL 33183
office or re agent. Las SIGNATURE	egistered agent, or both, in the State m fam iliar with, and accept the oblig	of Horida. Such chango was au ations of, Section 607,0505, Flor	uthorized by the corpor rida Statutes.	orporation submits this statement for the purporation's board of directors. I hereby accept the	appointment as registered
	Signature, typed or printed name of registered agr	ITON) and ittent apple after (NOTI	Registered Agent signature rec	quired when reinstating) D.	ATE
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	☐ DELETE	1.1 TITLE		Mange Addition
NAME	E NRIQUEZ, NORMAN		1.2 NAME	- 4 46 .10	**
STREET ADDRESS	13356 N.W. 8TH LANE		1.3 STREET ADDRESS	5701 Sw 130 th pla	
CITY-ST-ZIP	MIAMI FL 33182		1.4 CITY - ST - ZIP	MIRMI FL. 3	3183
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		i
TITLE		DELETE	3.1 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		
TITLE		☐ DELETE	51 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby o	certify that the information supplied w	th this filing does not qualify for	the exemption stated	in Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information
officer or of Block 12 of	on this annual report or supremblification of the corporation of the reci or Block 13 if changed, or on an atta	ir amiliate error is 1719 and \$000 a ver of trustee employeed to er chinest with an access	rrate and that my signa xecute this report as re	in Section 119 07(3)(i), Florida Statutes. I furth sture shall have the same legal effect as if mac equired by Chapter 607, Florida Statutes; and	that my name appears in