SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000034492 (3)

N.W.B. ENTERPRISES, INC.

Principal Place of Business 1011 IVES DAIRY ROAD. SUITE 210 NORTH MIAMI BEACH FL 33179

2. Principal Place of Business

Mailing Address

2a. Mailing Address

1011 IVES DAIRY ROAD. SUITE 210 NORTH MIAMI BEACH FL 33179 FILED Oct 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualified

04/17/1997 4. FEI Number

21		26	26			52-203H56	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27	27			8. Certificate of Status Desired	Fee Required
City & State		City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28					Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the curr	
24	25	29	30				Yes No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent
BOLTON, RICHARD A ESQ. 1011 IVES DAIRY ROAD, SUITE 210 NORTH MIAMI BEACH FL 33179							
						is (P.O. Box Number is Not Acceptable)	
						·	
				83			•
			<u> </u>	84	City		85 Zip Code
						FL.	
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							
12.		ND DIRECTORS	13.	ed Ag	ent signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PSTD			F	.	ADDITIONS OF AN OLD TO OF FIGURE AN	Change Addition
NAME	WOOD BOLTON, NANCY RAE		-11-	1.2 NAME		'	Change [ Addition ]
1011 BEC DAIDY DOAD CHITE 010				3 STREET ADDRESS			
CITY-ST-ZIP	MARTH MAMI REACH EL 22470			1.4 CITY-ST-ZIP			
TITLE		DELE			217		Change Addition
NAME		DELE	2.2 NAS			•	Cusinge
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			2.4 CIT				
TITLE		DELE			-"		Change Addition
NAME			3.2 NAN			•	Orlange [ Radition
STREET ADDRESS			3.3.51R	EET#	ADDRESS		
CITY-ST-ZIP			3.4 CIT				
TITLE		DELE		-			Change Addition
NAME			4.2 NAN	ΛE		•	
STREET ADDRESS			4.3 STR	EETA	ADDRESS		
CiTY-ST-ZIP			4.4 CITY	Y-ST-2	ZIP		
TITLE		DELE	TE 5.1 TITL	Æ			Change Addition
NAME			5.2 NAN	Æ		•	
STREET ADDRESS			5.3 STR	EET A	ADDRESS		
CITY-ST-ZIP			5.4 CITY	Y-ST-2	ZIP		
TITLE		DELE	TE 6.1 TITL	.E			Change Addition
NAME			6.2 NAN	ΛE		•	
STREET ADDRESS			6.3 STR	EETA	ADDRESS		
CITY-ST-ZIP			6.4 CITY	Y-ST-Z	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 path; that I am an officer or director of the corporation or the receiver or frustee 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.							