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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

STREET ADDRESS

Block 12 or Block 13 if changed, or on a



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000066864 (4)

N & V CONCORD INTERNATIONAL, INC.

Principal Place of Business Mailing Address 3741 SUNNY ISLES BLVD. SUITE 219 3741 SUNNY ISLES BLVD. SUITE 219 MIAMI FL 33160 MIAMI FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 65-0771302 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip Zio Country Personal Property Tax due June 30. Yes Yes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FRIEDEBERG, OLGA **3755 NE 167 STREET** Street Address (P.O. Box Number is Not Acceptable) SUITE 27 **B3** N MIAMI ABEACH FL 33160 Zip Code 84 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, 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, typed or printed name of registered agent and title if applicable (NCITE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. OFFICERS AND DIRECTORS DELETE Change 1.1 TITLE TITLE FRIEDEBERG, OLGA 1.2 NAME NAME 3755 NE 167 ST, SUITE 27 1.3 STREET ADDRESS STREET ADDRESS N MIAMI BEACH FL 33160 1.4 CITY-ST-ZIP CITY-ST-ZIP Val Kichin DOLLETE Change Addition 2.1 TITLE TITLE 16711 COLLINS AVE. 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 4 1908 N. Miami Blac CITY-ST-ZIP 2. 4 CITY - \$1 - ZIP Addition Change 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Kichin DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAMF NAME 4.3 STREET ADDRESS STREET ADDRESS 4 CHY-S1-ZIP CITY - ST - ZIP Addition Change 5.1 T∤TL€ TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP ☐ Change ☐ Addition DELETE 6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 City-St-ZiP

FILED Jan 20 1998 8:00am Secretary of State



14. Thereby certify that the information supplied with this filing does no 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 in flue and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the cover or truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in