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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000075414 (7)

NCR PUBLISHING, INC.

FILED May 15 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 989 PONCE DE LEON BLVD., STE. 1110 999 PONCE DE LEON BLVD., STE. 1110 CORAL GABLES FL 33134 CORAL GABLES FL 33134 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0777465 12342 SW 132 Court 12342 SW 132 Court 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required Cily & State City & State 6. Election Campaign Financing \$5.00 May Be Miami. Miami, FL FL Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 33186 25 USA 33186 30 USA Personal Property Tax due June 30. X Yes □ No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name RAPOPORT, ALLEN J Enrique E. Garcia
Street Address (P.O. Box Number is Not Acceptable)
12342 SW 132 Court 999 PONCE DE LEON BLVD., STE. 1110 82 **CORAL GABLES FL 33134** 83 City 33186 Miami 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 (NOTE: Registered Agent signature required when reinstating) gistered agent and title if applicable ICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIBECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE D p 1.2 NAME RAPOPORT, ALLÉN J NAME Garcia, Enrique, E. 999 PONCE DE LEON BLVD., STE. 1110 STREET ADDRESS 1.3 STREET ADDRESS 12342 S.W. 132 Court CORAL GABLES FL 33134 1.4 CITY-\$1-ZIP Miami, Fl 33186 CITY-ST-ZIP DELETE Change M Addition TITLE 2.1 TITLE 2.2 NAME Hector R. Almaguer NAME STREET ADDRESS 12342 SW 132 Court 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - S1 - ZIP <u> Miami. FL 33186</u> DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby cortify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 trusted 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.