Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90007 005 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000085048

1. Corporation Name

NEW VEI	nturez Business Solut	IONS, INC.							
Principal Place	e of Business	Mailing Address	_	-		0(1 00 (31 06))(08))) 2 030)	16101 91111 08111 0	(p .p.) 1011 10.p.	
155 ISLE OF VENICE, #601 155 ISLE OF VENICE, #601									
FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 33301					DO NOT WRITE IN THIS SPACE				
					3. Date incorporated or		7017102		
					10/01/1997				
2. Principal Pl	lace of Business	2a. Mailing Address	_		4. FEI Number		App	olied For	
21 5190 SW 17th st					65-0785634		Not	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			,	5. Certifcate of Status Desired		esired \square	\$8.75 Additional Fee Required		
City & State City & State					6. Election Campaign F	nancing	\$5.00 1	May Be	
23 Plantation, FL 28					Trust Fund Contributi	on	Added to	Fees	
Zip	Country	Zip	Country	<u> </u>	8. This corporation owe	s the current year In		 .	
24 33317 25 USA 29			30		Personal Property Ta			□No	
	9. Name and Address of Curren	Registered Agent		T	10. Name and Address	of New Registered	Agent	_	
ZINE	DOLING KENNETH		81	Name K	erneth Zwerd	اسعددا			
ZWERDLING, KENNETH			82	Street Add	lress (P.O. Box Number is No	t Acceptable)		,	
155 ISLE OF VENICE, #601 FORT LAUDERDALE FL 33301			83	21	90 SW 17+65	<u></u> -			
1011	I EAGDERDALE I E GOOD I		03						
			84	$\Gamma = \rho_I$	antation	FL	85 Zip C		
office or n	to the provisions of Sections 607.0500 egistered agent, or both, in the State of familiar with, and accept the obliga-	of Florida. Such change was a	lutnonzea by	tile corporat	poration submits this stateme ion's board of directors. I her	nt for the purpose o	f changing its interest as reg	registered gistered	
SIGNATURE	Wend givendle	ad the Kanakashia (NOT)	E- Panietorad Ana	ot eignature requir	ed when reinstating)		799		
12.	Signature, typed or printed pame of registered agent		13.	k algricular roqui	ADDITIONS/CHANGE	S TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE		President		Change	☐ Addition	
NAME	zwerdling, kenneth		1.2 NAME		Zwerdling, Ken 5190 sw 17th	neth			
STREET ADDRESS	155 ISLE OF VENICE #601		1.3 STREE	T ADDRESS	5190 SW 17th	st		}	
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		1.4 CITY-S	T-ZIP	Plantation, FL	33317		i	
TITLE		☐ DELETE	2.1 TTLE				☐ Change	☐ Addition	
NAME	·		2.2 NAME					ĺ	
STREET ADDRESS			2.3 STREE	T ADORESS				Ì	
CITY-ST-ZIP			2.4 CITY-	ST-ZIP:	- x	r = 2 2 m · · ·	<u> </u>		
TITLE		☐ DELETE	3.1 TITLE		* *		Change	☐ Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS				Ì	
CITY-ST-ZIP_			3.4. CITY-	ST-ZIP				[T] Addition	
TITLE		☐ DELETE	4.1 TITLE				☐ Change	Addition	
NAME			4. 2 NAME	Į.				Į	
STREET ADDRESS				TADORESS				}	
CITY-\$T-ZIP			4.4 CITY-5	IT-ZIP			Change	Addition	
TITLE		☐ DELETE	5.1 TITLE	İ			C Change	□ ∨001001) {	
NAME	·		5.2 NAME	TADDDECO				Į	
STREET ADDRESS				T ADDRESS				ļ	
CITY-ST-ZIP		DELETE	5.4 CITY-5 6.1 TITLE	01-ZIP			Change	Addition	
TITLE			6.2 NAME						

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 oath; 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS I THE WINDS IN THE STREET CITY-ST-ZIP OF THE COLUMN TO A STATE OF THE CO

NAME

NG OFFICER OR DIRECTOR