

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

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Oct 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000099543			
1. Corporation Name NENO / THE SHOP, INC.			
Principal Place of Business 5514 SW 28th TERR. FT. LAUDERDALE, FL 33312		Mailing Address	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	
3. Date Incorporated or Qualified 11/20/1997		4. FFI Number 65-0795014	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No			
9. Name and Address of Current Registered Agent NENO BOTTON 5514 SW 28th TERRACE FT. LAUDERDALE, FL 33312		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 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 provisions of Section 607.0505, Florida Statutes. SIGNATURE: Neno Botton NENO BOTTON (NOTE: Registered Agent's signature required when reinstating)			
12. OFFICERS AND DIRECTORS 1. TITLE NAME STREET ADDRESS CITY-ST-ZIP 2. TITLE NAME STREET ADDRESS CITY-ST-ZIP 3. TITLE NAME STREET ADDRESS CITY-ST-ZIP 4. TITLE NAME STREET ADDRESS CITY-ST-ZIP 5. TITLE NAME STREET ADDRESS CITY-ST-ZIP 6. TITLE NAME STREET ADDRESS CITY-ST-ZIP 7. TITLE NAME STREET ADDRESS CITY-ST-ZIP 8. TITLE NAME STREET ADDRESS CITY-ST-ZIP 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. TITLE NAME STREET ADDRESS CITY-ST-ZIP 15. TITLE NAME STREET ADDRESS CITY-ST-ZIP 16. TITLE NAME STREET ADDRESS CITY-ST-ZIP 17. TITLE NAME STREET ADDRESS CITY-ST-ZIP 18. TITLE NAME STREET ADDRESS CITY-ST-ZIP 19. TITLE NAME STREET ADDRESS CITY-ST-ZIP 20. TITLE NAME STREET ADDRESS CITY-ST-ZIP 21. TITLE NAME STREET ADDRESS CITY-ST-ZIP 22. TITLE NAME STREET ADDRESS CITY-ST-ZIP 23. TITLE NAME STREET ADDRESS CITY-ST-ZIP 24. 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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. SIGNATURE: Neno Botton			

CR2E034 (10/97)