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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000024338

STEVEN NEFT, INC.

FILED Mar 29, 1999 8:00 am **Secretary of State**

03-29-1999 90003 010 ***150.00



Mailing Address Principal Place of Business 7050 NW 44 ST. #410 7050 NW 44 ST. #410 LAUDERHILL FL 33319 LAUDERHILL FL 33319 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/13/1998 Applied For 2. Principal Place of Business 2a. Mailing Address FEI Number 65-0819719 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country This corporation owes the current year Intangible Zip Zip Country 30 Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **NEFT. STEVEN** Street Address (P.O. Box Number is Not Acceptable) 7050 NW 44 ST. #410 LAUDERHILL FL 33319 83 85 Zip Code 84 City 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 697.0505, Florida Statutes. SIGNATURE CR2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTOR 13. 12. DELETE Change ☐ Addition 1.1 TITLE TITLE 1.2 NAME **NEFT. STEVEN** NAME 7050 NW 44 ST, #410 1.3 STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33319 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ___ Addition DELETE □ Change 4.1 TITLE TIRE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition 61 TITLE □ DELETE TITLE 6.2 NAME NAME

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does pot 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 trusted employered 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 or an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS