

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S29275

(2)

1. Corporation Name
N.C.I., INC.

Principal Place of Business

4100 N POWERLINE RD
SUITE T-2
POMPAÑO BEACH FL 33073

Mailing Address

4100 N POWERLINE RD
SUITE T-2
POMPAÑO BEACH FL 33073-3051

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

BAKSH, CHANDRANIE
4100 N POWERLINE RD
SUITE T-2
POMPAÑO BEACH FL 33073

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.07403 and 607.1503, 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, Sections 607.0525, Florida Statutes.

SIGNATURE

(Signature, type or print name of person signing this report)

(Print, type or print name of person signing this report)

(Date)

12. OFFICERS AND DIRECTORS

TITLE PD [] DELETE

NAME BAKSH, CHANDRANIE
STREET ADDRESS 4405 N.W. 3 AVE.
CITY- ST- ZIP POMPAÑO BEACH FL

TITLE [] DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE [] DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

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STREET ADDRESS
CITY- ST- ZIP

TITLE [] DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE [] Change [] Addition

2. NAME

3. STREET ADDRESS

4. CITY- ST- ZIP

5. TITLE [] Change [] Addition

6. NAME

7. STREET ADDRESS

8. CITY- ST- ZIP

9. TITLE [] Change [] Addition

10. NAME

11. STREET ADDRESS

12. CITY- ST- ZIP

13. TITLE [] Change [] Addition

14. NAME

15. STREET ADDRESS

16. CITY- ST- ZIP

17. TITLE [] Change [] Addition

18. NAME

19. STREET ADDRESS

20. CITY- ST- ZIP

21. TITLE [] Change [] Addition

22. NAME

23. STREET ADDRESS

24. CITY- ST- ZIP

14. I do hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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

C. Baksh

2-13-97

00-4-968-3976

FILED
Mar 18 1997 8:00am
Secretary of State



3. Date Incorporated or Qualified 02/04/1991
4. FTT Number 65-0242809
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 has liability for intangible tax under s. 198.032, Florida Statutes [X] Yes [] No
10. Name and Address of New Registered Agent

3a. Date of Last Report 04/01/1996
Applied For Not Applicable

CR2E034 (9/96)