2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # \$97371

1. Entity Name

| NEXT | GR | APH | IICS. | INC |
|------|------|------------|-------|--------------|
| | CH I | 71 I I | 1100. | \mathbf{n} |

Principal Place of Business Mailing Address 6600 N.W. 12 AVE 6600 N.W. 12 AVE STE 201 FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33069-5112 3. Mailing Address 2. Principal Place of Business 2131 Blount Road 2131 Blount Road

FILED Apr 21, 2000 8:00 am Secretary of State

04-21-2000 90012 030 ***158.75



| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | DO NOT WRITE IN THIS SPACE | | | | | |
|---|-------------------------|---|--|-------------|--|----------------------------|---|--------------------------|----------------------------------|---------------------------|--|
| City & State | | | City & State | | | 4. | 4. FEI Number 65-0299743 | | | oplied For | |
| | | | Pompano Be | o Beach, FL | | | | | | ot Applicable | |
| Zip 33069 | | Country U.S.A. | Zip 33069 | Coun | | 5. | Certificate of Status Desired | | \$8.75 Add Fee Require | | |
| | | and Address of Current I | Registered Agent | | | 7. | Name and Address of New Reg | istered / | gent | | |
| | | | | | Name | ~ | | | - | | |
| ALIF, NABIL 6600 NW 12 AVE STE 201 | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | 2131 Blount Road | | | | | | |
| FT. L | AUDERDA | LE FL 33309 | | | City | | o Beach | FL | Zip Cod | 069 | |
| 8. The above | named entit | y submits this statement for | the purpose of changing its | register | | | gent, or both, in the State of Florid | a. | | | |
| | | | | | | | | | | | |
| SIGNATURE _ | Signature, typed | or printed name of registered agent a | nd title if applicable. (NOTE | : Registere | d Agent signatur | e required when | reinstating) | DATE | | | |
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FE After MAY 1, 2000 Fe Make Check Payable to | | | | 00 Fee | will be \$5 | 50.00 | 10. Election Campaign Finan Trust Fund Contribution. | cing | | 00 May Be d to Fees | |
| 11. | | OFFICERS AND | DIRECTORS | 12. | | Α | DDITIONS/CHANGES TO OFFICE | RS AND | DIRECTOR | S IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | BIL 12 AVE., STE 201 DERDALE FL 33309 | ☐ Delete | | | | 31 Blount Road | 220 | ☆ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V ANIDJAR 6600 NW | , SAMUEL 1 12 AVE., STE 201 DERDALE FL | ⊠ Delete | | | V Ni 21 | mpano Beach, FL dal Alif 31 Blount Road | | ☐ Change | ॡ] Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | , 1. 2.02 | <u> </u> | ☐ Delete | | | PO | mpano Beach, FL | | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | 1 | | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | • | | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | i | | ☐ Delete | - | | 1.00 | | | Change | ☐ Addition | |
| 13. I hereby of indicated | ertify that th | e information supplied with rt or supplemental report is | this filing does not qualify for true and accurate and that n | the exe | emption state | ed in Section | n 119.07(3)(i), Florida Statutes. I fue e legal effect as if made under oat gida Statutos, and that my name a | rther cer h; that I a | tify that the i | nformation or director | |

changed, or on an attachment with an address th all other like empowered

SIGNATURE:

4/12/2000

Daytime Phone #