

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

FILED
Jan 27 1997 8:00am
Secretary of State

DOCUMENT # S98768

(2)

1. Corporation Name
NAS MANAGEMENT, INC.



Principal Place of Business

1111 LINCOLN ROAD
SUITE 800
MIAMI BEACH FL 33139

Mailing Address

1111 LINCOLN ROAD
SUITE 800
MIAMI BEACH FL 33139-2451

3. Date Incorporated or Qualified
12/03/1991

3a. Date of Last Report
07/03/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

4. FEI Number
65-0300789

Applied For
Not Applicable

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. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

HOWARD, EUGENE J.
1111 LINCOLN RD.
SUITE 800
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

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 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE 0 ☐ DELETE

NAME ALPIZAR, NAYADE
STREET ADDRESS 18768 NW 79 WAY
CITY-ST-ZIP MIAMI BEACH FL

TITLE DV ☒ DELETE

NAME SROUR, DAVID
STREET ADDRESS 1111 LINCOLN RD., #800
CITY-ST-ZIP MIAMI BEACH FL

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE S ☒ Change ☐ Addition

12 NAME ALPIZAR, NAYADE
13 STREET ADDRESS 18768 NW 79 WAY
14 CITY-ST-ZIP Miami, FL 33015

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE P ☐ Change ☒ Addition

3.2 NAME GARFINKLE, DAVID
3.3 STREET ADDRESS 1111 LINCOLN RD. #800
3.4 CITY-ST-ZIP MIAMI, BEACH, FL 33139

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 of this report as an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/97

Date

305-538-8362

Daytime Phone #

0190626

CR2E034 (9/96)