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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

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NORMBAU OF AMERICA, INC.

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	f Business	Mailing Address					
C/O KENT HU 222 LAKEVIEW WEST PALM E US		C/O KENT HUFFMAN 222 LAKEVIEW AVE (WEST PALM BEACH F	#710		Date Incorporated or Qualified 01/07/1992	3a. Date of Last F 04/25/19	
- 0	- (P)	2a. Mailing Address			4. FEI Number		Applied For
2. Principal Plac			In f fma	n Fea	05 0000000	⊢	Not Applicable
Suite Apt #.	ent Huffman, Esq etc. Lipps Plaza	Suite Apt. #, etc 27 204 Phipp			5. Certificate of Status Desired	\$8.7°	5 Additional Required
City & State	Beach, FL	City & State		, ,	Election Campaign Financing Trust Fund Contribution		0 May Be d to Fees
Ζιρ 4 33480	Country 25 US	^{2φ} 29 33480	Gourn	try		No No	199.032,
133400	9. Name and Address of Currer				10. Name and Address of New R	legistered Agent	
828 ±ANS STEXATI WESTAY	bbarbeachtel:89401x		8	32 Street Addr 204 P 33 Street Addr 204 P 34 Oity Palm	ent Huffman, Esqu. Pess (P.O. Box Number is Not Acceptable) Phipps Plaza Beach	FL 85 2	rp Code 33480
or registere familiar with	d agent, or both, in the State of Flor n, and accept the obligations of, Sec	ida. Such change was authori tion 607,0505, Florida Statute	ZELL DV. KIE CO	e-named corpor orporation's boar	ration submits this statement for the purific of directors. I hereby accept the app	Car (CHICH, 43 registere	o agomiron
SIGNATURE	Kent Huffman, signature, typed or printed name of registered agri-	raid te lappleable (%)	OTE Heg store A	yjent ig ar in julie	n roll acting	ay 21, 19	
SIGNATURE	signature, typed or printed name of registered ago OFFICERS AN	eranome Lapplication (N ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	ORS IN 12
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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 emplowered 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. enate Wilde, President Wille May 21, 1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: Renate Wilde, President