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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

V50653

(7)

NUE PORT ASSOCIATES GROUP, INC.

FILED
Apr 30 1998 8:00am
Secretary of State



riiicipai riac	e or business	Mailing Addres	S			
	TH OCEAN BLVD. #5 N BEACH FL 33062		OCEAN BLVD.			
FUMENTO	DENOTITE \$3002	FUMFANU D	EACH FL 33062		DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified	
					07/14/1992	
2. Principal P	lace of Business	2a. Mailing Add	rece		4, FEI Number	TAngled For
			31035			Applied For
Sulte, Apt.	# etc	Suito Apl 6	oto	····	65-0369177	Not Applicat
22	π, θιο.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	е	City & State			Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	7ip		Country	8. This corporation owes or has paid the co	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr			- T	10. Name and Address of New Registered	Agent
B	ALDASSARRI, MATEUS C.G.			61 Name		
	051 NW 30 WAY			82 Street A		
	BOCA RATON FL 33431				ddress (P.O. Box Number is Not Acceptable)	
·	OUR INTONTE SOUST			83		
				~		
				84 City		85 Zip Code
	· · · · · · · · · · · · · · · · · · ·				Fi	_ '
Office or r	egistered agent, or both, in the Sta	ale of Horida. Such chai	nge was author	ized by the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registere
agent. I a	m familiar with, and accept the ob	ligations of, Section 607	.0505, Florida \$	Statutes	, , ,	,
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Regis	stered Agent signature re	equired when reinstating) DATE	
12.	OFFICERS A	AND DIRECTORS	1 1	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	DP	□ D	ELETE 1	.1 TITLE		☐ Change ☐ Additi
NAME	BALDASSARRI, MATEUS	C.G.	1	.2 NAME		
STREET ADDRESS	3051 NW 30 WAT			.3 STREET ADDRESS		
	BOCA RATON FL 33431			1		
CITY-ST-ZIP TITLE	DOOK TOTTE GOTOT			.4 CITY-ST-ZIP		Change Addition
		٥٠	· ·			L Change L Additi
NAME				.2 NAME		
STREET ADDRESS			2	3 STREET ADDRESS		
CITY-ST-ZIP				4 CITY-ST-ZIP		
TITLE			ELETE 3	1 TITLE		☐ Change ☐ Addition
NAME			3.	.2 NAME		
STREET ADDRESS			3.	.3 STREE1 ADDRESS		
CITY-ST-ZIP				.4. CITY - ST - 71P		
TITLE		□ D	ELETE 4.	.1 TITLE		Change Addition
NAME			4.	. 2 NAME		
STREET ADDRESS			4.	.3 STREET ADDRESS		
CITY-ST-ZIP				.4 CITY-ST-ZIP		
TITLE		D 0		.1 TITLE		Change Addition
NAME				2 NAME		
STREET ADDRESS				3 STREET ADDRESS		
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1		٥٠		•		C change C MORK
NAME				2 NAME		
STREET ADDRESS			4	3 STREET ADDRESS		
CITY-ST-ZIP	and a share sive in the	miller than filter		4 CITY-ST ZIP	140 07/0V/2 F	
indicated	on this annual report or supplemer	ntal annual report is true	and accurate.	and that my sion.	In Section 119.07(3)(i), Florida Statutes. I further cature shall have the same legal effect as if made u	nder nath: that I am an
Officer or o	director of the corporation or the re	eceiver or trustee empov	vered to execu	te this report as r	required by Chapter 607, Florida Statutes; and that	my name appears in
BIOCK 12 (or Block 13 if changed, or on an at	tachment with an addre	ss.			
	~~ V	-0.0				