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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90157 008 ***300.00

DOCU	MENT # L96141	•			
i. Corporatio	iii Name				
NOVAPE	EI, ING.			i idamidii dha idaid allai lida digali lida da	411 - 1811 - 6 1611 - 61611 - 61611 - 661
Principal Plac	e of Business	Mailing Address			TI) BIRII RIBII DIBII RIBII DIBII IOBI
3665 SW 30TH		3665 SW 30TH AVE			
FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312					
US US				DO NOT WRITE IN TH	HIS SPACE
				3. Date incorporated or Qualifed	
2 Oninginal D	Place of Business	2a. Mailing Address		08/15/1990 4. FEI Number	Applied For
 , '	race of Business	26		65-0245962	Not Applicable
21 26				\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25		30	Personal Property Tax.	Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
KUNGER, EDUARDO					
	5 SW 30TH AVE		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
	LAUDERDALE FL 33312		83		
		1 12			
	(1/1/1		84 City	F	85 Zip Code
11 Pursuant	to the provisions of Sections 607.0002	And 667.1698. Florida Statute	s. the above-named corp		
office or i	registered/agent or both, in the Sate	of Florida, Such change was au	thorized by the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as registered
SIGNATURÉ		101001,0000,01101	da Oloidios.		,
SIGNATURE		_ 	Registered Agent signature require		
12.	OFFICERS ANI			ADDITIONS/CHANGES TO OFFICERS	
TITLE	C00	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KLINGER, EDUARDO		1.2 NAME		
STREET ADDRESS	3665 SW 30TH AVE		1.3 STREET ADDRESS		ĺ
CITY-ST-ZIP	FT LAUDERDALE FL	DELETE	1.4 City-St-ZIP 2.1 TITLE		Change Addition
NAME	HOROWTIZ, SYMCHA		2.2 NAME		C 4.16.190
STREET ADDRESS	3665.SW.30TH AVE		2.3 STREET ADDRESS	The second of th	• •
CITY-ST-ZIP	FT LAUDERDALE FL	•	2.4 CITY-ST-ZIP		1
TITLE	TT ERODENDALE TE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		\
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	<i>'</i>		3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	•		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		1
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME 5.3 STREET ADDRESS		}
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP		□ DELETE	6.1 TITLE		Change Addition
NAME		}	6.2 NAME		
STREET ADDRESS		/	6.3 STREET ADDRESS		
SINCEL MUUNESS	\ / / /				{

14. I hereby cartify that the information supplied with this indicated on this annual report of supplemental angular officer or director of the corporation of the receiver of Block 12 or Block 13 if changed, co on an attachment is not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an opposited to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with all other like empowered.

SIGNATURE

REQUIRED OF SIGNING OFFICER OR DIRECTOR.