2004 FOR PROFIT CORPORATION

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT

DOCUMENT # L30549

NAVATECH ELECTRONICS CORPORATION



Principal Place of Business

Mailing Address

3103 NW 20TH ST MIAMI, FL 33142

3103 NW 20TH ST MIAMI, FL 33142

FILED Apr 19, 2004 8:00 am Secretary of State

04-02-2004 90044 048 ***150.00



01282004

CR2E034 (10/03)

4. FEI Number 65-0157414

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANCHEZ, ORESTES 3103 NW 20TH ST MIAMI, FL 33142

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 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. 							
SIGNATURE.					<u> </u>		
	Signitiure, typed or printed name of registered agent and title if	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cling 🖸 .	\$5.00 May Be Added to Fess	·		
10.	OFFICERS AND DIREC	TORS					
TITLE NAME Street Address City-St-Zip	PDT SANCHEZ, ORESTES E. 3103 N.W. 20 ST. MIAMI, FL 33142						
TITLE Majar Street address City-St-Zip	VPD FERNANDEZ, NELSON 3103 N.W. 20TH STREET MIAMI, FL 35142						
NAME STREET ADDRESS CITY-ST-ZIP	SD FERNANDEZ, NELSON JR. 3103 N.W. 20 STREET MIAMI, FL 33142			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SPACE		
NAME STREET ADDRESS CITY-ST-ZIP							

12. I hereby certify that the information supplied with this filin indicated on this report or supplemental report is true and of the corporation or the received or trustee emplowered changed, or on an attachment with an address with all of This filling does 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 officer or director overed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP