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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # G80805**

1. Corporation Name

NAUTILLIS INVESTIGATIONS, INC.

HAO HEC	o attentions, mo						
Principal Plac	e of Business	Mailing Address				11 41011 DIG11 WIG11 41	1011 01011 1001
8701 SW 128 ST. 8701 SW 128 ST.					•		
MIAMI FL 33176 MIAMI FL 33176							
					DO NOT WRITE IN THE	IIS SPACE	
					3. Date Incorporated or Qualifed 12/19/1983		ļ
a Bringing F	Place of Rusiness	2a, Mailing Address			4. FEI Number	I Ap	plied For
- i ''		26			59-2351981	<u> </u>	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 A		
22		27			5. Certifcate of Status Desired	Fee Re	quired
City & Sta	te	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Coun	try	8. This corporation owes the current year	Intangible	
24 .	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Curren	t Registered Agent		Name	10. Name and Address of New Register	ad Agent	
	NER, GLENN 1 SW 128 ST.				ress (P.O. Box Number is Not Acceptable)		
· ·	MI FL 33176		N 2004	33 4 4 4 7 7			
	•			3 1 27			2000 1 55 (1 8
**	to a second of	and appear to the same		4 XCity ng ana	with the property of the state	85	vorie and State of
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au tions of, Section 607.0505, Flori	thorized i da Statut	by the corporation	coration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as rec	gistered
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE	PD	DELETE	1,1 TITL	E		☐ Change	☐ Addition
NAME	KUTNER, GLENN		1.2 NAM	ε			()
STREET ADDRESS	0704 CM 400 OT		1.3 STR	EETADDRESS			
CITY-ST-ZIP	MIAMI FL		1,4 CITY	-ST-ZIP			
TITLE	С	☐ DELETE	2.1 TITL	E		☐ Change	Addition '
NAME	KUTNER, SHARAN C		2.2 NAN	ie ¦			}
STREET ADDRESS	8701 SW 128TH STREET		2.3 STR	EET ADDRESS			}
CITY-ST-ZIP	MIAMI FL 33176		2. 4 CIT	Y-ST-ZIP			
TITLE		☐ DELETE	3.1 TITL	E (☐ Change	☐ Addition
NAME			3.2 NAN	E			•
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP		·	
TITLE		☐ DELETE	4.1 TITL	E		Change	☐ Addition
NAME			4. 2 NAI	AE			1
STREET ADDRESS			4 3 STR	EET ADDRESS	-		
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL	l l		Change	Addition :
NAME	1		5.2 NAN	E			

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5,4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

☐ Change

☐ Addition