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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(3)

Orporation Name	107110
NAT INTERNATIONAL	CORPORATION

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**FILED** 

Jan 23 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address							
1320 SW 126 PLACE MIAMI FL 33184		1320 SW 126 PLACE MIAMI FL 33184-2312					
					3. Date Incorporated or Qualified 08/17/1972 3s. Date of Last Report 02/20/1996		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	1 1	pplied For
21	21 26				59-1424381	Not Applicable	
Suite, Apt. #, etc.		Suite. Apt. #, etc.	Suite. Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional		Additional
22		27		···.	D. Certificate of Status Desired	Fee f	Required
City & State		<b>├</b> ─ '	City & State		6. Election Campaign Financing		<b>О</b> Мау Ве
		28			Trust Fund Contribution		to Fees
Zip Country		· · ·	Zip Country		8. This corporation has liability for in	ntangible tax under Yes  No	s. 199,032,
24	25 9. Name and Address of Cui	29	30	<u> </u>	Florida Statutes  10. Name and Address of New Re		
TAI	MAYO, ALBERTO	Trent Hogisteroo Agont		81 Name	19. Malilo alia Pasione di Itali ile	Jietora rigorit	
	20 SW 128TH PL						
	MI FL			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
estiv.	UNI F L			83		· · · · · · · · · · · · · · · · · · ·	
				84 City		FL   65   Zir	Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607 1508, Florida Statu	ites, the a	bove-named cor	poration submits this statement for the p	urpose of changing	its registered
office or	registered agent, or both, in the St	tate of Florida, Such change was	authorize	d by the corpora	tion's board of directors. I hereby accep	of the appointment a	s registered
	and accept the or	onganona or, acorom our scood, r	ioriga dia	iolos.			
SIGNATURE	Signature: type d or printed name of registered	a agent and title if applicable (NC	TE: Ragistere	d Agent signature requ	ired when reinstating)	DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD	☐ DELETE	1.1 7	TLE		Change	Addition
NAME	TAMAYO, ALBERTO		1.2 N	AME			
STREE1 ADDRESS	1320 SW 126TH PL		138	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			iTY-ST-ZIP	<u> </u>		
TITLE	SD TANANA FELIDA	☐ DELETE	21 T	ITLE		L Change	Addition
NAME	TAMAYO, FELIPA 1320 SW 126TH PL		2.2 N	-			
STREET ADDRESS	MIAMI FL			Treet address			
CITY-ST-ZIP	MIAMI FL	Decem		City-st-zip		1 0	- Laddain
TOTLE	TAMAYO, IVETTE	☐ DELETE	3.1 7			L Change	Addition
NAME	4000 ONL 400TH DI		3.2 N	1			
STREET ADDRESS	MIAMI FL			TREET ADDRESS			
CITY-ST-ZIP TITLE	V Internal C	DELETE	3.4. C	CITY-ST-ZIP		☐ Change	Addition
	TAMAYO, ALBERTO JR.	F" Offere	- 1	NAME			
NAME	4000 OW 400TH DI			1			,
STREET ADDRESS	MIAMI FL			TREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.1 7	ITY-ST-ZIP		☐ Change	Addition
NAME		- Marit	5.2 N				
			- 4	TREET ADDRESS			
STREET ADDRESS			1	CITY-ST-ZIP			
CITY-S1-ZIP TITLE		DELETE	617			Change	Addition
NAME		hand October	6.2 N	1		۷.49	
				STREET ADDRESS			
STREET ADDRESS			0.35	HINEET ALLUMESS			

14. I do 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.

Daytime Phone #