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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 628585

101

Principal Place of Business	Mailing Address
4641 8. UNIVERSITY DRIVE	4641 S. UNIVERSITY DRIVE
DAVIE FL 33328-3617	DAVIE FL 33326-3617
US	US

FILED Jun 18 1997 8:00am Secretary of State

NAUTILUS TERMINAL OPERATORS, INC. Principal Place of Business Mailing Address 4641 8. UNIVERSITY DRIVE DAVIE FL 33328-3817 US DAVIE FL 33328-3817 US											
								3. Date Incorporated or Qualified 07/03/1979		ate of Last R /24/1996	eport
2. Principal P	Place of Busines	68	2a. Mailin 26	g Address				4. FEI Number 59-1922077		├	oplied For of Applicable
Suite, Apt.	. #, etc.		Suite,	Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional equired
City & Stat	le		City &	State				6. Election Campaign Financing		\$5.00	·
Zip		Country	28 Zip		Cour	otes		Trust Fund Contribution	9	Added	
24	25	¬ •	29		30	шц		This corporation has liability for Florida Statutes	r intangibl ∭Yes	e tax under s □ No	. 199.032,
		nd Address of Currer		Agent				10. Name and Address of New R			
SANTOS, ED 4641 S. UNIVERSITY DRIVE				61	Name				•		
				ļ	82	Street Add	ddress (P.O. Box Number is Not Acceptable)				
DAVIE FL 33328			}	83							
					Ĺ						
					84	City		FL	85 Zip	Code	
SIGNATURE		printed name of registered age	ont and title it applica	ible (NC				poration submits this statement for the tion's board of directors. I hereby acciving when reinstating) ADDITIONS/CHANGES TO OFF	DATE		
TITLE	PD			DELETE	1.1 7(7	ILE				Change	☐ Addition
NAME	KRATISH,				1.2 NA	ME					
STREET ADDRESS	1	THORNE AVENUE					ADDRESS				
CITY-ST-ZIP TITLE	MIAMI BEA	UN PL		DELETE	1.4 CIT 2.1 TiT		T- ZIP			Change	Addition
NAME	KATISH, R	OBERT			2.2 NA						
STREET ADDRESS	1499 SUN				2.3 \$11	REET.	ADDRESS				
CITY-ST-ZIP	FT. LAUDE	RDALE FL			2 4 CI	ty-S	I - ZIP				
				DELETE	3 1 TH	LE				Change	☐ Addition
	1				1						
NAME					3.2 NA		ADORESS				
NAME STREET ADORESS					3.3 ST	REET.	ADORESS				
NAME STREET ADORESS CITY-ST-ZIP				DELETE		REET .	ĭ			☐ Change	☐ Addition
NAME STREET ADORESS CITY-ST-ZIP TITLE				DELETE	3.3 STF 3.4. CI	REET , NY-S	ĭ			☐ Change	☐ Addition
NAME STREET ADORESS CITY-ST-ZIP TITLE NAME				DELETE	3.3 STF 3.4 CF 4.1 TIT- 4.2 NA	REET , TY-S ILE AME	ĭ			Change	Addition
NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP					3.3 STF 3.4 CF 4.1 TIT- 4. 2 NA 4.3 STF 4.4 CF	REET , TY-S TLE AME REET , TY-ST	ST - ZIP ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				DELETE	3.3 STF 3.4 CT 4.1 TIT 4.2 NA 4.3 STF 4.4 CIT 5.1 TIT	REET , TY-S LE AME REET , TY-ST	ST - ZIP ADDRESS			☐ Change	Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME					3.3 STF 3.4 CF 4.1 TIP 4.2 NA 4.3 STF 4.4 CF 5.1 TIT 5.2 NAI	REET , TY-S TLE AME REET , TY-ST TLE	ST - ZIP ADORESS T- ZIP				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS					3.3 STF 3.4 CF 4.1 TIF 4.2 NA 4.3 STF 4.4 CF 5.1 TIT 5.2 NAI 5.3 STF	REET , TY-S LE AME REET , TY-S1 LE ME REET ,	ADDRESS ADDRESS ADDRESS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					3.3 STF 3.4 CF 4.1 TIP 4.2 NA 4.3 STF 4.4 CF 5.1 TIT 5.2 NAI	REET / ITY-S ILE REET / ITY-SI ILE AME REET / ITY-SI ILE AME REET / ITY-SI	ADDRESS ADDRESS ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP				DELETE	3.3 STF 3.4 CF 4.1 TIF 4.2 NA 4.3 STF 4.4 CF 5.1 TIT 5.2 NAI 5.3 STF 5.4 CF	REET / ITY-S LE AME REET / ITY-SI LE ME RFET / ITY-SI LE	ADDRESS ADDRESS ADDRESS			Change .	☐ Addition
NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				DELETE	3.3 STH 3.4 CIT 4.1 TIT 4.2 NA 4.3 STH 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STH 6.1 TITI 6.2 NAI	REET, TY-S LE AME REET, TY-SI LE ME REET, ME REET, ME REET, ME LE ME	ADDRESS ADDRESS ADDRESS			Change .	☐ Addition

row inercoy certify that the information supplied with this annual report or supplemental annual report or supplemental annual report is frue 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 allocking it with an address.