

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matron
Secretary of State
1900 BANKERS BUILDING
TALLAHASSEE, FLORIDA 32399-0001

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 16 PM 2:56

DOCUMENT # F94000003262 (2)

1. Corporation Name
FORTUNA INVESTMENTS, INC.

Principal Place of Business
341 W. TUDOR SUITE 202 ANCHORAGE AK 99504

Do Not Write In This Space

3. Date incorporated or qualified: **06/21/1994**
3a. Date of Last Report
4. FIC Number: **92-0147972**
Applied For: Not Applicable:
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. The corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
2a. Mailed Address
21. State, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Country
26. Mailed Address
27. State, Apt. #, etc.
28. City & State
29. Zip
30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST
SUITE 105
TALLAHASSEE FL 32301

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type for principal place of business agent and the incorporator

Signature type for registered agent and the incorporator

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: CPST
NAME: ARKLEY, ROBIN P II
STREET ADDRESS: 341 W. TUDOR ST
CITY, ST, ZIP: ANCHORAGE AK 99504

TITLE: V
NAME: MENDHEIM, JACK L
STREET ADDRESS: 341 W. TUDOR ST
CITY, ST, ZIP: ANCHORAGE AK 99504

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

TITLE:
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

11. TITLE: Change Addition
12. NAME:
13. STREET ADDRESS:
14. CITY, ST, ZIP:

21. TITLE: Change Addition
22. NAME:
23. STREET ADDRESS:
24. CITY, ST, ZIP:

31. TITLE: Change Addition
32. NAME:
33. STREET ADDRESS:
34. CITY, ST, ZIP:

41. TITLE: Change Addition
42. NAME:
43. STREET ADDRESS:
44. CITY, ST, ZIP:

51. TITLE: Change Addition
52. NAME:
53. STREET ADDRESS:
54. CITY, ST, ZIP:

61. TITLE: Change Addition
62. NAME:
63. STREET ADDRESS:
64. CITY, ST, ZIP:

14. I, the below signatory, certify that the information furnished with this filing is voluntarily furnished, and true, and equally for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true, and is complete and that my signature shall have the same legal effect as if made under oath. If I am an officer or director of the corporation or the registered agent, I am empowered to receive into the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report. I declare under the penalty of perjury that I am the signatory.

SIGNATURE: *Robin P. Arkley*
SIGNATURE AND FULL OR PRINTED NAME OF SIGNATORY TO BE PRINTED BELOW