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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H85447

(1)

IN	NOVATIVE SHIPPING SYSTEM								
Princ	sipal Place of Business	Mailing Address			T INDIANI DIDI IDER DANA DIDI TARKI IDA		SIANK DIANI DEBIL	HEN AU	
	state street sota fl 34236	1549 STATE STREET SARASOTA FL 34238-5808 US	RASOTA FL 34236-5808						
					 Date Incorporated or Qualified 11/15/1985 		Date of Last F	Report	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number			pplied For	
21		26		59-2317459	59-2317459 Not A				
22	uite, Apt. #, etc.	Suite, Apt. #, etc.				₩	\$8.75 Additional Fee Required		
23	ity & State	City & State		Election Campaign Financing Trust Fund Contribution					
Zı 24	j			у	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	g. Name and Address of Cu				10. Name and Address of New R	egistered	l Agent		
	O'BRIEN, VINCENT A ESQUIRE		81	Name					
	19651 BRUCE B. DOWNS BLVD.		82	Street A	ddress (P.O. Box Number is Not Accepta	ble)	·		
	Suite E6-3 Tampa Fl 33647		83	1					
			84	City		FI	85 Zip	Code	
8	Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Sagent. I am familiar with, and accept the C IATURE	State of Florida. Such change was bligations of, Section 607.0505, F	authorized b lorida Statute	y the corp	corporation submits this statement for the oration's board of directors. I hereby accu-	purpose opt the ap	of changing pointment as	its registered registered	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		ND DIRECTO	RS IN 12	
TITLE	PD						☐ Change	Addition	
NAME	KRUEGER, JEFFREY A		1.2 NAME						
STREET	ADDRESS 1549 STATE ST.		1.3 STREET ADDRESS						
CHY-S		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE				Change	Addition	
TITLE	COLE, KENNETH R	T herest	2.2 NAME				C) cuande	Addition	
	TADDRESS 1549 STATE ST.			T ADDRESS					
CITY-5	04040074 64 04000		2.4 CITY-						
THILE	D	DELETE	3.1 TITLE	<u> </u>			Change	Addition	
NAME	SEWELL, JACK B.		3.2 NAME						
STREET	ADDRESS 4242 HIGEL AVE.		3.3 STREE	T ADDRESS					
CITY-S		T orien	3.4 CITY-	ST-ZIP				T A June .	
TITLE	D NODGAN DANIEL I	☐ DELETE	4.1 TITLE	.			L Change	☐ Addition	
NAME	MORGAN, DANIEL L 1ADDRESS 1549 STATE ST.		4. 2 NAME	T ADDRESS					
CITY-S	04040074 51		4.3 STREE	i					
TITLE	- WHITE IN LE	☐ DELETE	51 TITLE	U. EN			Change	Addition	
NAME			52 NAME						
STREET	T ADDRESS		5 3 STREE	T ADDRESS					
CITY-S	S1 - ZIP		5.4 CiTY-	ST-ZIP		·····			
TITLE			6.1 TITLE				Change	Addition	
NAME			6.2 NAME						
	TADORESS			T ADDRESS					
City-5	S1-ZIP	polind with this filling does not gue	6.4 CITY-	ST-ZIP	ated in Section 119.07(3)(i) Florida Status	es I furth	er certify the	t the	
	I do hereby certify that the information sup information indicated on this annual repor- I am an officer or directly of the Jorpon I appears in Block 12 In God Vivil chills	or suppliemental annual report is in or the receiver or trustee empo of or an attachment lith an ac	true and accommend to exe	curate and cute this re	that my signature shall have the same legort as required by Chanter 607 Floride	al effect Statutes;	as if made un and that my	nder path; that name	