

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 27 PM 3:23

DOCUMENT # H94156

(7)

1. Corporation Name

NAUTH-MAR, INCORPORATION

Principal Place of Business

**C/O GUY B. BAILEY, SR.
2690 S.BAYSHORE, STE.800A
MIAMI FL 33133**

Mailing Address

**C/O GUY B. BAILEY, SR.
2690 S.BAYSHORE, STE.800A
MIAMI FL 33133**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1986

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

59-2840453

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BAILEY, GUY B., JR.
501 BRICKELL KEY DR STE 300
COURVOISIER CENTRE
MIAMI FL 33131-8606**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85.

Zip Code

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, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when transferring

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DC**
NAME **BAILEY, GUY B.**
STREET ADDRESS **2690 SO. BAYSHORE DR., #800-A**
CITY-ST-ZIP **MIAMI FL 33133**

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **S**
NAME **MALCOLM, VI K.**
STREET ADDRESS **2690 S.BAYSHORE, #800A**
CITY-ST-ZIP **MIAMI FL**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **DS**
NAME **BABCOCK, MARY**
STREET ADDRESS **2690 SO. BAYSHORE DR., #800-A**
CITY-ST-ZIP **MIAMI FL 33133**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **D**
NAME **BAILEY, PATRICIA E**
STREET ADDRESS **2690 SO. BAYSHORE DR., #800-A**
CITY-ST-ZIP **MIAMI FL**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **D**
NAME **BABCOCK, E.VOSE, III**
STREET ADDRESS **2690 S.BAYSHORE DR.**
CITY-ST-ZIP **MIAMI FL**

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **DV**
NAME **BAILEY, JOHN R.**
STREET ADDRESS **2690 S.BAYSHORE DR., #800A**
CITY-ST-ZIP **MIAMI FL**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. Further, I 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 187, Florida Statutes, and that my name appears in Block 12 or Block 13, changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

-John R. Bailey, V.P.

2/8/95

(305) 856-3930