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

PROFIL CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # J47026

(6)

14. I do hereby certify that the information indomestion indicated on this annual Lam an officer or director of the ke appears in Block 12 or Block 13 if

SIGNATURE:

## **FILED** Mar 07 1997 8:00am Secretary of State

OCEAN NAVIGATOR, INC.  Principal Place of Business Mailing Address  9 GROVE ISLE DR. #1708 COCONUT GROVE FL 33133-4118  OCEAN NAVIGATOR, INC.  Mailing Address  9 GROVE ISLE DR. #1708 COCONUT GROVE FL 33133-4118								
					<ol> <li>Date Incorporated or Qualified 12/15/1986</li> </ol>		te of Last 23/1996	Report
Principa Pi	ace of Business	2a. Mailing Address			4. FEI Number 65-0002842	- t		Applied For Not Applicable
Suite, Apt #		26   Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & Stare		City & State			6. Election Campaign Financing		\$5.0	0 May Be
Zip	Country	<b>28</b>	Coun	lry	Trust Fund Contribution  8. This corporation has liability for it	L.J ntangible		d to Fees s. 199.032,
	25	29	30		Florida Statutes	Yes [	] No	
	g, Name and Address of Curre	ent Registered Agent		Momo	10. Name and Address of New Reg	pistered .	Agent	
KOPELWITZ, HARVEY G. 700 SE THIRD AVE.				81 Name				
	LAUDERDALE FL 33316				fress (P.O. Box Number is Not Acceptab	le)		
				33				
			1	34 City		FL	85 Zi	p Code
GNATUH:	o the provisions of Sections 637.05 gistered agent or both, in the State of far har with and accept the obli-	gent and his diappin able (N	QTL: Registered		uired when reinstating)	DATE		
IGNATUH:	Significate Byjard or printed name of respectively a	gent and his diappin able (N	QTL: Registered		uired when reinstating)	DATE		
GNATUHE	Sign on displating rated to the of displation of a Special Billion OFFICERS ALDP		IOTE: Registered 13.	Agent signaturd requ		DATE		ORS IN 12
GNATUHE L H	OFFICERS AT TOP KOPEL, LARRY 3 GROVE ISLE DR #1708	gert and become pricable (8 ND-DIRECTORS	IOTE: Registered 13. 11 TITL 12 NAM	Agent signaturd requ	uired when reinstating)	DATE	DIRECTO	ORS IN 12
GNATUER  H ME RE-1 ADDRESS Y-51 7 :	Sign one depending repertures of respective and OFFICERS AT DP KOPEL, LARRY	gent ensitie din pinable (\$ ND DIRECTORS DELETE	13. 11. 11. 11. 12. 13. 13. 14.01	Agent signaturd required  F  ME  EET ADDRESS  (- ST-ZIP	uired when reinstating)	DATE	DIRECTO	ORS IN 12
GNATUFE  B  H  ME  RE-TABORESS Y-SL-7-1  H	OFFICERS AT TOP KOPEL, LARRY 3 GROVE ISLE DR #1708	gert and become pricable (8 ND-DIRECTORS	13. 11 TITU 12 NAN 13 STR 14 CIT 2.1 TITU	Agent signatural requirements  F  AE  EEET ADDRESS  7-ST-ZIP  E	uired when reinstating)	DATE	DIRECTO	ORS IN 12
SNATUFE  H ME RETABORES YEST 7: H MM	OFFICERS AT TOP KOPEL, LARRY 3 GROVE ISLE DR #1708	gent ensitie din pinable (\$ ND DIRECTORS DELETE	13. 11.111. 12.NAN 13.STR 14.CIT 22.NAN	Agent signatural requirements  F  AE  EEET ADDRESS  7-ST-ZIP  E	uired when reinstating)	DATE	DIRECTO	ORS IN 12
GNATUFE  H ME RETABORES Y ST 7 : U MR RETABORES	OFFICERS AT TOP KOPEL, LARRY 3 GROVE ISLE DR #1708	perdiens fit of applicable (\$\) ND DIRECTORS DELETÉ DELETÉ	13. 11 TITE 12 NAP 13 STP 14 CIT 22 NAP 23 STP 2.4 CIT 2.1 TITE 2.4 CIT 2.4 CIT 2.5 CIT TITE 2.7	Agent signaturd requ  F  AE  EET ADDRESS  (- ST- ZIP  E  EET ADORESS  Y- ST- ZIP	uired when reinstating)	DATE	DIRECTO Change	ORS IN 12 e
CONATURE  H ME H-1 ADDRESS (Y-51-7-1) H MR RELLADDRESS (Y-51-7-1) H MR RELLADDRESS (Y-51-7-1) H MR RELLADDRESS	OFFICERS AT TOP KOPEL, LARRY 3 GROVE ISLE DR #1708	gent ensitie din pinable (\$ ND DIRECTORS DELETE	13. 31 TITL 12 NAM 13 STR 1.4 CIT 2.1 TITL 2.2 NAM 2.3 STR 2.4 CIT 3.1 TITL 3.3 TITL 3.4 CIT 3.1 TITL 3.5 TITL 3.5 TITL 3.5 TITL 3.7 TITL	Agent signaturd required  F  ME  EET ADDRESS  (*-ST-ZIP  E  EET ADDRESS  Y-ST-ZIP  E	uired when reinstating)	DATE	DIRECTO	ORS IN 12 e Addition
CONATUFE  H  ME  HE-LABORESS (Y-SU-7-1)  H  ME  HRELADORESS  LE  ME  ME  ME  ME  ME  ME  ME  ME  ME	OFFICERS AT TOP KOPEL, LARRY 3 GROVE ISLE DR #1708	perdiens fit of applicable (\$\) ND DIRECTORS DELETÉ DELETÉ	13. 3 1 TITL 12 NAN 13 STR 1.4 CIT 22 NAN 2.3 STR 2.4 CIT 3.1 TITL 3.2 NAN	Agent signaturd required  F  ME  EET ADDRESS  (*-ST-ZIP  E  EET ADDRESS  Y-ST-ZIP  E	uired when reinstating)	DATE	DIRECTO Change	ORS IN 12 e Addition
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CONATURE  LE ME RELLABORESS LY-SL-7: LE ME RELLABORESS LY-SL-7: LE MA RELLABORESS LY-SL-7: LY	OFFICERS AT TOP KOPEL, LARRY 3 GROVE ISLE DR #1708	ped ensitic didipinable (S ND DIRECTORS DELETE  DELETE  DELETE	13. 11 TIT 12 NAM 13 STF 14 CIT 21 TITI 22 NAM 23 STF 2.4 CIT 3.1 TITI 3.2 NAM 3.3 STF 3.4 CIT 4.1 TITI 4.2 NAM 4.8 STF	Agent signaturd required  AE  EET ADDRESS  Y-ST-ZIP  EET ADDRESS  Y-ST-ZIP  EET ADDRESS  Y-ST-ZIP  EET ADDRESS  ME  EET ADDRESS  ME  EET ADDRESS	uired when reinstating)	DATE	DIRECTO Change	DRS IN 12  P
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