

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L00455 (0)

1. Corporation Name

WENTURA CORP.



Principal Place of Business

1384 HERITAGE ACRES
STE A
ROCKLEDGE FL 32955
US

Mailing Address

1384 HERITAGE ACRES
STE A
ROCKLEDGE FL 32955
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

BAR-NAVON, BOAZ
1384 HERITAGE ACRES BLVD
SUITE A
ROCKLEDGE FL 32955

3. Date Incorporated or Qualified

07/03/1989

3a. Date of Last Report

05/01/1995

4. FET Number

59-2955600

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

☐ Yes ☐ No

10. Name and Address of New Registered Agent

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 607.006, Florida Statutes.

SIGNATURE

Signed, typed or printed name of registered agent and state of residence

(If the Registered Agent's signature is required when reinstating)

DATE

4/29/96

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PTSD
BAR-NAVON, BOAZ
1384 HERITAGE ACRES BLVD, STE A
ROCKLEDGE FL 32955

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VASD
BAR-NAVON, DONNA
1384 HERITAGE ACRES BLVD, STE A
ROCKLEDGE FL 32955

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VASD
BAR-NAVON, HAIM
1384 HERITAGE ACRES BLVD, STE A
ROCKLEDGE FL 32955

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VASD
BAR-NAVON, ZIRA
1384 HERITAGE ACRES BLVD, STE A
ROCKLEDGE FL 32955

☒ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

ABST. SECT
BAR-NAVON, ZIRA
1384 HERITAGE ACRES BLVD
Rockledge, FL 32955

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)(k), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

4/29/96

407-690-2222

CR2E034 (12/95)