

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 # M09011 (1)

1. Corporation Name

NAPP-TIME LTD, INC.



Principal Place of Business

**20860 SAN SIMEON WAY
APARTMENT 405
NORTH MIAMI FL 33179
US**

Mailing Address

**20860 SAN SIMEON WAY
APARTMENT 405
NORTH MIAMI FL 33179
US**

3. Date Incorporated or Qualified
12/17/1984

3a. Date of Last Report
05/31/1995

2. Principal Place of Business

2a. Mailing Address

21 **2606 OAK BCH BLVD**

26 **2606 OAK BCH BLVD**

4. FEI Number
59-2498283

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

22 **8**

27

6. Election Campaign Financing
Trust Fund Contribution ☐

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

City & State

City & State

23 **SEBRING, FL**

28 **SEBRING, FL**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

Zip Country

Zip Country

24 **33872**

25 **HISLANDS**

29 **33872**

30 **HISLANDS**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NAPP, JACK M.
20860 SAN SIMEON WAY
APARTMENT 405
NORTH MIAMI FL 33179**

81 Name **JACK NAPP**

82 Street Address (P.O. Box Number is Not Acceptable)
2606 OAK BCH BLVD

83

84 City **SEBRING**

FL

85 Zip Code
33872

11. Pursuant to the provisions of Sections 607.05 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]

SIGNATURE OF NEW AGENT

[Signature] 5/21/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☐ DELETE
NAME	NAPP, JACK M.	
STREET ADDRESS	20860 SAN SIMEON WAY	
CITY-ST-ZIP	NORTH MIAMI FL	
TITLE	SD	☐ DELETE
NAME	NAPP, JUDITH	
STREET ADDRESS	20860 SAN SIMEON WAY	
CITY-ST-ZIP	NORTH MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1. TITLE	PD	☒ Change ☐ Addition
2. NAME	NAPP, JACK M.	
3. STREET ADDRESS	2606 OAK BCH BLVD	
4. CITY-ST-ZIP	SEBRING FL 33872	
5. TITLE	SD	☒ Change ☐ Addition
6. NAME	NAPP, JUDITH	
7. STREET ADDRESS	2606 OAK BCH BLVD	
8. CITY-ST-ZIP	SEBRING FL 33872	
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-ST-ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-ST-ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-ST-ZIP		

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 owner 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/97 (941) 655-4831

CR2E034 (12/95)