

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am  
Secretary of State

05-02-2001 90011 021 \*\*\*150.00

DOCUMENT # P00000037946

1. Entity Name

NAVRATIL INVESTMENT COMPANY

Principal Place of Business

8496 PARKWOOD BLVD.  
LARGO FL 33777

Mailing Address

8496 PARKWOOD BLVD.  
LARGO FL 33777

2. Principal Place of Business

5002 Habersham Lane

Suite, Apt. #, etc.

3. Mailing Address

9 "SAME"

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33619

Country

Zip

Country

4. FEI Number

59-3639157

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NAVRATIL, GEORGE

8496 PARKWOOD BLVD.  
LARGO FL 33777

X Name

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

5002 Habersham Lane

City

Tampa

FL

Zip Code

33619

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

GEORGE NAVRATIL,  
PRESIDENT

1-12-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

FILE NOW!!! FEE IS (\$150.00)  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to (Department of State)

10. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	NAVRATIL, GEORGE	
STREET ADDRESS	8496 PARKWOOD BLVD.	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	VD	<input type="checkbox"/> Delete
NAME	NAVRATIL, JOHN	
STREET ADDRESS	8496 PARKWOOD BLVD.	
CITY-ST-ZIP	LARGO FL 33777	
TITLE	SD	<input type="checkbox"/> Delete
NAME	NAVRATIL, VICTORIA	
STREET ADDRESS	8496 PARKWOOD BLVD.	
CITY-ST-ZIP	LARGO FL 33777	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5002 Habersham Lane	Address
STREET ADDRESS	Tampa, FL 33619	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5002 Habersham Lane	Address
STREET ADDRESS	Tampa, FL 33619	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5002 Habersham Lane	Address
STREET ADDRESS	Tampa, FL 33619	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE NAVRATIL, PRES. 4/15/01 1-12-01 (813)248-6386

Date

Daytime Phone #

CR2E034 (10/00)