


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90245 012 ***150.00

DOCUMENT # P0000069613

1. Entity Name
NAVICON, CORP.



Principal Place of Business Mailing Address
4914 SW 147 PLACE **4914 SW 147 PLACE**
MIAMI, FL 33185 **MIAMI, FL 33185**

2. Principal Place of Business 3. Mailing Address
1150 N.W. 72 AVE. **1150 N.W. 72 AVE.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE 510 **SUITE 510**

City & State City & State
MIAMI, FL **MIAMI, FL.**

Zip Country Zip Country
33126 **USA** **33126** **USA**

04262004 **Chg-P** **CR2E034 (10/03)**

4. FEI Number Applied For
65-1026804 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**



6. Name and Address of Current Registered Agent

ROTH, LEONARDO A ESQ
C/O ROTH ROUSSO & DARRACH, P.A.
3440 HOLLYWOOD BLVD., SUITE 360
HOLLYWOOD, FL 33021

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST ZANZOTTERA, CARLOS H 4914 SW 147 PLACE MIAMI, FL 33185	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZANZOTTERA, CARLOS H 4914 SW 147 PLACE MIAMI, FL 33185	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST ZANZOTTERA, CARLOS H 1150 N.W. 72 AVE., SUITE 510 MIAMI, FL. 33126	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZANZOTTERA, CARLOS H 1150 N.W. 72 AVE., SUITE 510 MIAMI, FL. 33126	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with a title, like empowered.

SIGNATURE:  **CARLOS H. ZANZOTTERA PVST** **4/27/04** **305-592-7630**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #