

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000038475

Entity Name: ICART NAUTIQUE, INC.

FILED  
Apr 27, 2004  
Secretary of State

**Current Principal Place of Business:**

3003 TAMIAMI TRAIL NORTH, STE 300  
NAPLES, FL 34103

**Current Mailing Address:**

3003 TAMIAMI TRAIL NORTH, STE 300  
NAPLES, FL 34103

**New Principal Place of Business:**

27200 RIVERVIEW CENTER BOULEVARD  
309  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

27200 RIVERVIEW CENTER BOULEVARD  
309  
BONITA SPRINGS, FL 34134

FEI Number: 59-3740642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VINCENT, NORMA  
3003 TAMIAMI TRAIL NORTH, STE 300  
NAPLES, FL 34103

**Name and Address of New Registered Agent:**

VINCENT, NORMA B  
27200 RIVERVIEW CENTER BOULEVARD  
309  
BONITA SPRINGS, FL 34134

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: NORMA BRENNE VINCENT

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: HEISE, CHRISTIAN  
Address: 3003 TAMIAMI TRAIL NORTH, STE 300  
City-St-Zip: NAPLES, FL 34103

Title: DVPS ( ) Delete  
Name: HEISE, ISGARD  
Address: 3003 TAMIAMI TRAIL NORTH, STE 300  
City-St-Zip: NAPLES, FL 34103

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: NORMA, VINCENT B  
Address: 27200 RIVERVIEW CENTER BOULEVARD  
City-St-Zip: BONITA SPRINGS, FL 34134

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMA BRENNE VINCENT

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04/27/2004

Electronic Signature of Signing Officer or Director

Date