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PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P32531 (6)

1. Corporation Name

NOVATEK INTERNATIONAL, INC.



Principal Place of Business

1401 NEPTUNE DRIVE
BOYNTON BEACH FL 33426

Mailing Address

1401 NEPTUNE DRIVE
BOYNTON BEACH FL 33426

3. Date Incorporated or Qualified
01/18/1991

3a. Date of Last Report
06/12/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHONE, LARRY
50 SOUTHEAST FOURTH AVENUE
DELRAY BEACH FL 33483

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of appointment

(NOTE: Registered Agent signature required when the State is changed)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	COONEY, FRANK J.	
STREET ADDRESS	1340 NEPTUNE DRIVE	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	THOMAS, TRACY M.	
STREET ADDRESS	1340 NEPTUNE DRIVE	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ERNEST, RICHARD G	
STREET ADDRESS	1980 GROSSLAND PARKWAY	
CITY - ST - ZIP	ALPHARETTA GA 30201	
TITLE	SB	<input checked="" type="checkbox"/> DELETE
NAME	COONEY, BRIGITTE U	
STREET ADDRESS	1340 NEPTUNE DRIVE	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	THOMAS, TRACY M.	
STREET ADDRESS	1340 NEPTUNE DRIVE	
CITY - ST - ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KORER, HOWARD	
STREET ADDRESS	9363 KING STREET	
CITY - ST - ZIP	FRANKLIN PARK IL 60131	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PID
1.3 STREET ADDRESS	Cooney, Frank J.
1.4 CITY - ST - ZIP	1401 Neptune Drive
2.1 TITLE	Boynton Beach, FL 33426 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	D
2.3 STREET ADDRESS	Puccio, Jaime
2.4 CITY - ST - ZIP	8469 Rainbow Bridge Lane
3.1 TITLE	Springfield, VA 22153 <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	S
4.3 STREET ADDRESS	Schone, Larry
4.4 CITY - ST - ZIP	50 Southeast Fourth Avenue
5.1 TITLE	Delray Beach, FL 33483 <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 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:

Frank J. Cooney

Frank J. Cooney

04/08/96

(407)736-6659

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)