

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 15 AM 9:07

DOCUMENT # P93000043569 (1)

1. Corporation Name
NAMARTIN CORPORATION

Principal Place of Business: **153 NO. STATE RD. 7 MARGATE FL 33063**
Mailing Address: **4433 POINCIANA ST. LAUDERDALE BY THE SEA FL 33308**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		28		06/17/1993	04/29/1994
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
22		27		65-0420270	Not Applicable
City & State		City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
23		26		<input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	6. This corporation has liability for intangible tax under s. 195.002, Florida Statutes	
24	25	29	30	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MARTIN, NIGEL A 4433 POINCIANA ST. LAUDERDALE BY THE SEA FL 33308				81 Name	JOHN ALLEN		
				82 Street Address (P.O. Box Number is Not Acceptable)	4433 POINCIANA ST.		
				83			
				84 City	LAUDERDALE-BY-THE-SEA FL	85 Zip Code	33308

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]* JOHN ALLEN VICE PRESIDENT 06-07-95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL REGISTERED AGENTS	
TITLE	P	11 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTIN, JULIE	12 NAME	JOHN ALLEN
STREET ADDRESS	4433 POINCIANA ST.	13 STREET ADDRESS	4433 POINCIANA ST.
CITY, ST, ZIP	LAUDERDALE BY THE SEA FL 33308	14 CITY, ST, ZIP	LAUDERDALE-BY-THE-SEA FL 33308
TITLE		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY, ST, ZIP		24 CITY, ST, ZIP	
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY, ST, ZIP	
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY, ST, ZIP	
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY, ST, ZIP		54 CITY, ST, ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 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 110.07(3)(h), 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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* J. ALLEN V. PRES. 06-07-95 771-3567

CR2E034 (3/95)