FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000047838 (6)

FILED May 22 1998 8:00am Secretary of State

AUHIATIC HOLDINGS, INC.			
Principal Place of Business	Mailing Address	<u> </u>	
14231 NORTH BAYSHORE DRIVE	14231 NORTH B	AYSHORE DRIVE	
MADEIRA BEACH FL 33708	MADEIRA BEACH		
			DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
2. Principal Place of Business	2a, Mailing Addre	ASS.	07/08/1993 4. FEI Number Applied For
21	26		4. FEI Number Applied For Not Applicab
Suite, Apt. #, etc.	Suite, Apt. #,	elc.	4 60 75
22	27		5. Certificate of Status Desired Fee Regulred
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Ζφ	Country	8. This corporation owes or has paid the current year Intangible
24 25	29	30	Personal Property Tax due June 30. Yes No
g, Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Agent
L antos , Edward J		81 Name	
2987 62ND AVENUE SOUTH		82 Street	Address (P.O. Box Number is Not Acceptable)
ST. PETERSBURG FL 33712			
		63	
		84 City	85 Zip Code
			►L
office or registered agent, or both, in the Sta agent 1 an familiar with, and accept the obli SIGNATURE Signature, typical or protest name of registered.		ge was Authorized by the corp 1505, Florida Statules. (NOTE Registered Agent signature	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered statements when reinstaling.
	NO DIRI CTORS	I 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	☐ DEL		Change Additio
NAME POLUTNIK, DANIEL		12 NAME	
STREET ADDRESS 14231 NO BAYSHORE DR		1.3 STREET ADDRESS	
CITY-ST-ZIP MADEIRA BCH FL		1.4 CITY - ST - ZIP	
TITLE	DEL	ETE 2.1 TITLE	☐ Change ☐ Addition
NAME POLUTNIK, DANICA		2.2 NAME	
STREET ADDRESS 14231 N. BAYSHORE DR.		2.3 STREET ADDRESS	
CITY-ST-ZIP MADEIRA BCH FL		2. 4 CITY-ST-ZIP	
TITLE	DEL	ETE 31TITLE	TRUNSURUR Change Addition
NAME		3.2 NAME	TCHOLAS EOLUTNIK 1195 FENNELL AVENUE E.APT. 309
STREET ADDRESS		3.3 STREET ADDRESS	HAMILTON, ONTARIO CANADA
CITY-SI-ZIP		34 CHY-ST-ZIP	
TITLE	[_] DEL		Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	/
CITY-ST-ZIP			
TITLE		4.4 CITY - ST - ZIP	
	D DEC	ETE 5.1 TITLE	Thange Addition
NAME	DEL	ETE 5.1 TITLE 5.2 NAME	Thange Addition
STREET ADDRESS	OEL	ETE 5.1 TILLE 5.2 NAML 5.3 STREET ADDRESS	Thange Addition
STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAML 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	405/2
STREET ADDRESS CITY-SY-ZIP TITLE	DOEL	51 TITLE 52 NAML 53 STREET ADDRESS 54 CITY - ST - ZIP ETE 6.1 TITLE	Change Addition
STREET ADDRESS CITY-SY-ZIP TITLE NAME		5.1 TITLE 5.2 NAMI 5.3 STREET ADDRESS 6.4 CITY - ST - ZIP ETE 6.1 TITLE 6.2 NAME	Change Addition
STREET ADDRESS CITY-SY-ZIP TITLE		51 TITLE 52 NAML 53 STREET ADDRESS 54 CITY - ST - ZIP ETE 6.1 TITLE	405/2

yand accurate and that my signature shall have the same legal effect as it made under path, that i am a wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in