

FILE NOW: FLUOR FILE AFTER MAY 15 1994

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra S. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 11 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000064508 (3)

1. Corporation Name

NAVIN CORPORATION

Principal Place of Business

**2980 INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH FL 32114**

Mailing Address

**2980 INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH FL 32114**

DO NOT WRITE IN THIS SPACE

3. Date the Corporation is chartered	3a. Date of last Report
09/13/1993	05/01/1994
4. FID Number	Applied For Not Applicable
59-3201305	
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
7. Does corporation have liability for information for records? (2-120100) Florida Statute	☐ Yes ☐ No

2. Name of each officer or director	2a. Mailing Address
21	26
22	27
23	28
24	29
25	30

9. Name and Address of Current Registered Agent

**SARAIYA, SWETA M
2980 INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH FL 32114**

10. Name and Address of New Registered Agent

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 607.001, 607.002, and 607.003, 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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.003, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Not valid if Registered Agent is not a resident of Florida)

Signature of Registered Agent (Not valid if Registered Agent is not a resident of Florida)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME	D SARAIYA, SWETA M	13.1 NAME	☐ Change ☐ Addition
12.2 STREET ADDRESS	3951 BILL FRANCE BLVD.	13.2 NAME	
12.3 CITY/STATE/ZIP	DAYTONA BEACH FL 32114	13.3 STREET ADDRESS	
12.4 NAME		13.4 CITY/STATE/ZIP	
12.5 STREET ADDRESS		13.5 NAME	☐ Change ☐ Addition
12.6 CITY/STATE/ZIP		13.6 STREET ADDRESS	
12.7 NAME		13.7 CITY/STATE/ZIP	
12.8 STREET ADDRESS		13.8 NAME	☐ Change ☐ Addition
12.9 CITY/STATE/ZIP		13.9 STREET ADDRESS	
12.10 NAME		13.10 CITY/STATE/ZIP	
12.11 STREET ADDRESS		13.11 NAME	☐ Change ☐ Addition
12.12 CITY/STATE/ZIP		13.12 STREET ADDRESS	
12.13 NAME		13.13 CITY/STATE/ZIP	
12.14 STREET ADDRESS		13.14 NAME	☐ Change ☐ Addition
12.15 CITY/STATE/ZIP		13.15 STREET ADDRESS	
12.16 NAME		13.16 CITY/STATE/ZIP	
12.17 STREET ADDRESS		13.17 NAME	☐ Change ☐ Addition
12.18 CITY/STATE/ZIP		13.18 STREET ADDRESS	
12.19 NAME		13.19 CITY/STATE/ZIP	
12.20 STREET ADDRESS		13.20 NAME	☐ Change ☐ Addition
12.21 CITY/STATE/ZIP		13.21 STREET ADDRESS	
12.22 NAME		13.22 CITY/STATE/ZIP	
12.23 STREET ADDRESS		13.23 NAME	☐ Change ☐ Addition
12.24 CITY/STATE/ZIP		13.24 STREET ADDRESS	
12.25 NAME		13.25 CITY/STATE/ZIP	
12.26 STREET ADDRESS		13.26 NAME	☐ Change ☐ Addition
12.27 CITY/STATE/ZIP		13.27 STREET ADDRESS	
12.28 NAME		13.28 CITY/STATE/ZIP	
12.29 STREET ADDRESS		13.29 NAME	☐ Change ☐ Addition
12.30 CITY/STATE/ZIP		13.30 STREET ADDRESS	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(1)(b), Florida Statutes. I further certify that the information submitted 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. This filing shall be in effect for all the corporations on the return or returns incorporated to create this report as required by Chapter 607, Florida Statutes, and that my return appears in Block 12 or Block 13 of a transcript or as an attachment with an address.

SIGNATURE:

S. M. Saraiya **SARAIYA SWETA M 5-7-94 706-258-7-26**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR