

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

pg. 182

DOCUMENT # P93000085475 (0)

1. Corporation Name:

NAUTICUM TECHNIKS, INC.



Principal Place of Business

35 W. PENDLETON AVE.
EUSTIS FL 32726
US

Mailing Address

% ACCOUNTING & BUSINESS CONSULTANTS INC
790 E BROWARD BLVD SUITE 302
FT LAUDERDALE FL 33301

2. Principal Place of Business

2a. Mailing Address

21 State Apt. #, etc.

26 State 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

SMITH, TIM
35 W PENDLETON AVE
EUSTIS FL 32726

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 607.1503, 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

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
D	SMITH, TIM	35 W PENDLETON AVE	EUSTIS FL 32726	☐
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE	Change	Addition
11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY, ST, ZIP	☐	☐	☐
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY, ST, ZIP	☐	☐	☐
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY, ST, ZIP	☐	☐	☐
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY, ST, ZIP	☐	☐	☐
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY, ST, ZIP	☐	☐	☐
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY, ST, ZIP	☐	☐	☐
71 TITLE	72 NAME	73 STREET ADDRESS	74 CITY, ST, ZIP	☐	☐	☐

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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 registered or business agent named to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 (as applicable) or on an attached form with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 29 1996 352 885 0221

CR2E034 (12/95)

ACCOUNTING AND BUSINESS
CONSULTANTS

March 26, 1996

44.282

Florida Department of State
Division of Corporations
Annual Report Section
P.O. Box 13900
Tallahassee, FL 32317

RE: Nauticum Technieks, Inc.
Ref #: P93000085475

To Whom It May Concern:

In response to your letter dated March 12, 1996, we are adding under the signature line the words "by Power of Attorney". After calling your office today, Gretchen instructed us to do accordingly.

The owner is presently working in Europe and is unable to sign documents such as these. His father, J. Robert Smith, is his personal representative and handles the Corporation affairs.

Please accept this Annual Report as filed in order to keep this corporation active. Thank you for your attention to this matter.

Sincerely,

Deborah L. Cane

Deborah L. Cane

Enc.