

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 27, 2003 8:00 am**  
**Secretary of State**

0128570 AT

**DOCUMENT # P94000009799**

**1. Entity Name**  
**NAUTILUS WATERSPORTS, INC.**



**Principal Place of Business**  
**6890 POINSETTA AVE #B**  
**CAPE CANAVERAL FL 32920**

**Mailing Address**  
**6890 POINSETTA AVE #B**  
**CAPE CANAVERAL FL 32920**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number 59-3227599**

Applied For

Not Applicable

**5. Certificate of Status Desired**

☐

**\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**PASSARETTI, FRANCINE**  
**6890 POINSETTA AVE #B**  
**CAPE CANAVERAL FL 32920**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
Trust Fund Contribution.

☐

**\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**D PASSARETTI, FRANCINE**  
**6890 POINSETTA AVE #B**  
**CAPE CANAVERAL FL 32920**

☐ Delete

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ Change ☐ Addition

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☐ Change ☐ Addition

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment 80141317  
**NAUTILUS WATERSPORTS INC.**

631 Gladiola Street • Merritt Island, Florida 32952

(407) 452-3703 • Fax (407) 452-3728

301 -

8-25-03

FLORIDA DEPT. OF STATE

Document # P94000009799

FBI Number - 59-3227599.

I CONTACTED the Division of Corporations to let them know this was the first notice I received. I always make the payment when I receive the first notice. I never received the first one. I was told to send a letter stating that fact. I asked if there was a way to tell if I was even mailed the 1st notice. I was told just to do this, that they couldn't tell. Hopefully you will accept this. Check for 150.00 is enclosed.

Thank you.

Francis Pansini