**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000024959 1. Corporation Name

NADER'S MARINE INC.

## May 01, 1999 8:00 am Secretary of State

05-01-1999 90075 017 \*\*\*150.00



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Division I Divis		Mailing Address				-{-	- L'EDDINATION NO TATAN ANNO BANK EL		(IEH DIGIT IDI	IA DIRAM LIDIA 1900	
Principal Place	•	Mailing Address							•		
3806 CHATER RD 3806 CHATER RD LAKELAND FL 33810-0702 LAKELAND FL 33810-0702							DO NOT WRI	ITE IN THIS	SPACE		
							DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed				
	•					1	4/01/1995	•		ļ	
2. Principal P	lace of Business	2a. Mailing Address					I Number		A	pplied For	
21	•	26				59	9-3303881		. N	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				$^{+}$	-		\$8.75	Additional	
22		27				3. CE	ertifcate of Status Desired		Fee R	equired	
City & Stat	le .	City & State			-	6. El	ection Campaign Financing			May Be	
23		28				Tn	ust Fund Contribution		Added	to Fees	
Zip	Country	Zíp _	Cou	ntry			nis corporation owes the curr	rent year Int			
24	25		30		·		ersonal Property Tax.  ame and Address of New I	Pagistarad	Yes	□No	
<del>-</del>	9. Name and Address of Current	Registered Agent		81 Na	me	10. Na	ame and Address of New I	Registered	Agerit		
NAD	ER, NIAOMI	1					·				
	3 N COMBEE RD			82 Str	eet Addre	ess (P.O.	Box Number is Not Accepta	able)	•	İ	
ŁAKI	ELAND FL 33801			83			·				
									······································		
				84 City	4			FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes	s, the a	oove-nan	ned corpo	oration su	ubmits this statement for the	purpose of	changing its	s registered	
office of r	registered agent, or both, in the State of im familiar with, and accept the obligation	f Florida. Such change was auf	thorized	.bv the c	orporatio	n's board	d of directors. I hereby accep	pt the appoi	ntment as r	egistered	
agent ra	mir laminal with and addopt the bongan	5115 GI, GGG, GG, GGG, C 1611						,			
					•						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered	Agent signa	ture required			DATE			
SIGNATURE	OFFICERS AND	DIRECTORS	13.		prie required		tating) DITIONS/CHANGES TO OF				
	OFFICERS AND				ture required				ID DIRECTO		
12.	OFFICERS AND NADER, NIAOMI	DIRECTORS	13. 1.1 TI 1.2 N/	LE ME							
12.	OFFICERS AND D. NADER, NIAOMI 3806 CHARTER RD	DIRECTORS	13. 1.1 T 1.2 N/ 1.3 ST	LE ME REET ADDR							
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D NADER, NIAOMI 3806 CHARTER RD LAKELAND FL 33809	DIRECTORS	13. 1.1 TF 1.2 N/ 1.3 ST 1.4 CF	LE ME REET ADDR Y-ST-ZIP					Change	Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND D NADER, NIAOMI 3806 CHARTER RD LAKELAND FL 33809 VP	DIRECTORS	13. 1.1 TI 1.2 NV 1.3 ST 1.4 CI 2.1 TI	LE ME REET ADDR Y-ST-ZIP LE							
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D. NADER, NIAOMI 3806 CHARTER RD LAKELAND FL 33809 VP NADER, GEORGE	DIRECTORS	13. 1.1 TI 1.2 N/ 1.3 ST 1.4 CI 2.1 TI 2.2 N/	LE ME REET ADDR 'Y-ST-ZIP LE ME	ESS				Change	Addition	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND D NADER, NIAOMI 3806 CHARTER RD LAKELAND FL 33809 VP NADER, GEORGE 3806 CHARTER RD	DIRECTORS	13.  1.1 TT  1.2 NV  1.3 ST  1.4 CI  2.1 TT  2.2 NV  2.3 ST	LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR	ESS				Change	Addition	
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12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS AND D NADER, NIAOMI 3806 CHARTER RD LAKELAND FL 33809 VP NADER, GEORGE 3806 CHARTER RD	DIRECTORS	13.  1.1 TT  1.2 NV  1.3 ST  1.4 CI  2.1 TT  2.2 NV  2.3 ST	LE ME REET ADDR Y-ST-ZIP LE ME REET ADDR TY-ST-ZIP	ESS				☐ Change	☐ Addition	
12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS AND D NADER, NIAOMI 3806 CHARTER RD LAKELAND FL 33809 VP NADER, GEORGE 3806 CHARTER RD	DIRECTORS  DELETE	13. 1.1 TI 1.2 NV 1.3 ST 1.4 CI 2.1 TI 2.2 NV 2.3 ST 2.4 C 3.1 TI 3.2 NV	LE  ME REET ADDR Y-ST-ZIP LE ME REET ADDR TY-ST-ZIP LE ME	ESS				☐ Change	☐ Addition	
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14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP