SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1900 AMOUNT DUE ON OR BEFORE 8/7/98: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION FIED Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 **DIVISION OF CORPORATIONS** 95 NOV 14 AH 11: 33 DOCUMENT # 1. Corporation Name P95000039581 (0) Cretary of state TALLAHASSEE, FLORIDA NATSU INVESTMENT CORP. Principal Place of Business Mailing Address 1717 NORTH BAYSHORE DRIVE 1717 NORTH BAYSHORE DRIVE SUITE 3431 SUITE 3431 MAM FL 33132 MAMI FL 33132 Se. Date of Last Report 3. Date Incorporated or Qualified 05/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2,156 North BAY Road 2156 26 058 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required : 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Miami Miam 23 26 Trust Fund Contribution Added to Fees: Country This corporation has liability for intangible tax under s. 199.032, Yes 🔀 No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Age 81 ACELOR, CHARLES 1717 NORTHBAYSHORE DR. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 3431** 83 **MAMI FL 33132** City Zin Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. CHARLES ACELOR SIGNATURE orlature, typed o OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (1994) 13. TITLE PSD DELETE Change (Call Addition 1.1 TITLE ACELOR, CHARLES NAME 1.2 NAME 700002009657 1717 N.BAYSHORE DR. #3431 STREET ADDRESS -11/20/96--01053--011 1.3 STREET ADDRESS MAMI FL 33132 CITY-ST-ZIP 1.4 CITY-ST-ZIP ************** Change Addition DELETE TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAUE 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE NAME 4.2 NAME

44. 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, the furnished 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 or the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 11 if changed, or on an attachment with an address.

SIGNATURE:

STREET ADDRESS

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Change : Addition

4.4 CITY-ST-ZIP

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5 2 NAME

6.1 TITLE

62 NAME

DELETE

DELETE