

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90126 050 ***150.00

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DOCUMENT # P95000069809

1. Corporation Name
NAMTRIG INCORPORATED

Principal Place of Business
1117 SWEET HEATHER LANE
APOPKA FL 32712
US

Mailing Address
1117 SWEET HEATHER LANE
APOPKA FL 32712
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/07/1995

4. FEI Number
59-3340557

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 8600 Venezia Dr. Apt 2227

22 Orlando, Florida

23 32810 Orange

24 Zip Country

2a. Mailing Address

26 P.O. Box 160757

27 Alt. Springs, Florida

28 32716 ORANGE/?? Siminole??

29 Zip Country

9. Name and Address of Current Registered Agent

GIRTMAN, JAMES M
1117 SWEET HEATHER LANE
APOPKA FL 32712

10. Name and Address of New Registered Agent

81 Name GIRTMAN, JAMES M.
82 Street Address (P.O. Box Number is Not Acceptable) 8600 Venezia Dr. Apt. 2227
83
84 City Orlando, FL 85 Zip Code 32810

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GIRTMAN, JAMES M
STREET ADDRESS 1117 SWEET HEATHER LANE
CITY-ST-ZIP APOPKA FL 32712

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS, IN 12

1.1 TITLE PD
1.2 NAME GIRTMAN, JAMES M.
1.3 STREET ADDRESS 8600 VENEZIA DR. APT. 2227
1.4 CITY-ST-ZIP ORLANDO, FL 32810

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 14, 99 407 667-0677

Date

Daytime Phone #

CR2E034 (1/98)