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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortiam

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

P96000043470 (9)

NAUTIKOS, INC.

APPROVED AND FILED

1997 JUL -3 PM 12: 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address								THE DIRECTION OF STATE OF STAT	ALL a a lahi aa hii ee	III Va iri Viava	ANGUE GEB EE L OO	II ODII IEDI	
321 N CONGRESS AVE 321 N CONGRESS AV DELRAY BEACH FL 33445 DELRAY BEACH FL 3													
							1 .	Date Incorporated or Qualified 3a. Date of Last Report 05/15/1996					
2. Principal P	lace of Busine	2a, Madi	2a. Mailing Address				4. FEI Number			A	oplied For		
21		26					Not Applicable						
Suite, Apt.		Suite 27	 				5. Certificate of Status Desired Sa.75 Additional Fee Required						
City & Stat	te	City	City & State				6. Election Cam	paign Financing	-	\$5.00	May Be	ì	
23	··		28				Trust Fund Contribution Added to Fees						
Zip		Country	h1	Zip Coun						as liability for intangible tax under s. 199.032,			
24		:5 and Address of Curren	1 Registered					Florida Statutes Yes No 10. Name and Address of New Registered Agent					
		ING AGGIESS OF COTTER	r Lagisteren	ждаги		8 1 N	lame /	10, Name and A	A	- Sistered A	gent		4
	HL, N D JR							AURA 1	HIPPAS	505	5		
	se kindred						ess (P.O. Box Numb		ble)				
JT8	JART FL 349	194				83	1⊃	170 10	m Trai	$\alpha \sim$	·		-
					į								Ţ
							Pity P.	86.		FL	上上3.	3418	
11. Pursuant office or r agent. La	to the provision registered age am familier with	ons of Sections 607.050 oft, or both, in the State I, and accept the obliga	2 and 607.150 of Florida. Su hions of, Sect	08, Fforida Statu ich change was iion 607.0505, Fl	tes, the at authorized lorida Stat	oove-na d by th utes:	amed corpi e corporati	oration submits this on's board of direct	ors. I hereby acce	pt the appo	ointment as	ts registered registered	
SIGNATURE	XX	Promo	ben							1-30	-97		
	Signature, typer o	r printed name of regist year age				l Agent si	ignature require	ed when reinstating)	······································	DATE	····		ے ۔
12.	V	OFFICERS ANI	DIRECTORS	DELETE	13.			ADDITIONS/C	HANGES TO OFFI	CERS AND	DIRECTOR Change	RS IN 12 Addition	_ 8
TITLE	YRES'	IDENT		- DETEM	1.1 111		į				L_1 Change	LI Addition	9
NAME LANKA CHAPPAS				12									3
STREET ADDRESS	15170	70th TRA	Tr. W	~		REET ADD							Ù
CITY-ST-ZIP	<u> </u>	B.6., FL.	55419	DELETE		IY-ST-Z	IP				Change	Addition	٦Þ
TITLE	VICE	PRESIDENT		L.J DELLIE	2.1 Til 2.2 NA						☐ Cusude	ADDITION	`
PICHARD HARING			and '	1917 '									Ì
STREET ADDRESS	320	O CONSTRUCT A	UR #1	کن ک		BEET ADO]						
CITY-ST-ZIP TITLE	7-10	Deving Be	11, Pu 3	DELETE	2. 4 Cl 3.1 Til	11Y-S1-Z	(IP)				Change	Addition	
NAME		ETARY			3.2 N/		-				O. William	7 NO. (101)	-
STREET ADDRESS	NNW	. REILLY 1 S.W. 164 TA				REFT ADO	ngess						
CITY-ST-ZIP	1481	7 5.W. 1011 14	∕₹ Ι. Βν.1			NCC I AEIL ITY-ST-Z							
TITLE	MAGN	W, PL 331	0_/	DELETE	4.1 Jil		-				Change	Addition	7
NAME					4. 2 N								
STREET ADDRESS	1					REET ADI	nress						
CITY-ST-ZIP						1Y-ST- <i>2</i> I							
TITLE				DELETE	5.1 111		<u>- </u>				Change	Addition	
NAME				_	5.2 NA		}						
STREET ADDRESS	1					REET ADO	DRESS						
CITY-ST-ZIP						TY-ST-Z							
TITLE				DELETE	61 111		<u>"</u>				Change	Addition	1
NAME	1			****	6.2 NA			nñi	00217 9/97010		ړ``لاچ	AVN	
STREET ADDRESS						REET ADD	DRESS	~U5/1	J3/3(U]U J3/3(U]U	15 (UL)1 \(\)	710M '	
CITY-ST-ZIP	-				1	TY - S1 - Z		***3	90.00		•	1114	}
					¥ 01		<u> </u>						1

14. I do 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 empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 changed, or or an attackment with an address.