03-09-1999 90009 031 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000087960

NAVITAR	MANUFACTURING INC.										
Principal Place	of Business	Mailing Address	. ,,						10 15 13		
200 COMMERCE DRIVE ROCHESTER NY 14623 US 200 COMMERCE DRIVE ROCHESTER NY 14623 US							DO NOT WRITE IN THIS SPACE				
US		03				-	3. Date Incorp	orated or Qualife			
2. Principal Place of Business 2a. Mailing Address 21			ess				4. FEI Number			 - - 	plied For t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			etc.				5. Certifcate o	f Status Desired		\$8.75 A Fee Re	
City & State - City & State			+	<u> </u>			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country 25	Zip	30	ountry	,		8. This corpora	ation owes the co	ırrent year		□No
<u></u>	9. Name and Address of Curre			T	1 10		10. Name and	Address of Nev	/ Registere	ed Agent	
	DSTEIN, JEREMY			81	Name						
1000 EAST ISLAND BOULEVARD				82			s (P.O. Box Nup	nber is Not Acce	ptable)	F 903	
MAMI-FL 33160				83	City					85 Zip (Code
				-	M	im	i Bench		F		Code 5139
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida, Such chang	ia was authoriz	ed bv	the corbo	corpora oration's	ation submits thing board of direct	s statement for the state of th	cept the app	of changing its pointment as re	registered gistered
SIGNATURE	<i>C</i>	\sim	J u	(44)	٠ مه	-A.R	كر		DATE	[01)	
	Signature, typed or printed name of registered ag	ND DIRECTORS	(NOTE: Register		nt signature re	driced w		CHANGES TO C		AND DIRECTO	RS IN 12
TITLE	D			TITLE	1					Change	Addition
NAME	GOŁDSTEIN, JEREMY		1.2	NAME		2 ^	n C. 00	inte Di	IVE	# 903	1
STREET ADDRESS	1000 EAST ISLAND BOULEVA	RD, SUITE 1005	1.3	STREE	TADDRESS	ى ر دە.		inte Oil	22	. Da	
CITY-ST-ZIP	MIAMI FL 33160			CITY-S	T-ZIP	Pu	ATHI BEAL	h rig	33		
TITLE	Р	□ DI	LETE 2.1	TITLE						Change	☐ Addition
NAME	GOLDSTEIN, JULIAN			NAME	ŀ						ł
STREET ADDRESS	200 COMMERCE DRIVE				T ADDRESS						ļ
CITY-ST-ZIP	ROCHESTER NY 14623	·		TITLE	ST-ZIP					- Change	Addition
TITLE				NAMÉ	1					- onenge	
NAME					TADDRESS						
STREET ADDRESS			1	. CITY-S							
CITY-ST-ZIP TITLE		D		TITLE	21-21					Change	Addition
NAME				NAME							
STREET ADDRESS			4.3	STREE	T ADDRESS						
CITY-ST-ZIP			4,4	CITY-S	T-ZIP						
TITLE	 	□ D		TITLE	1					☐ Change	☐ Addition
NAME			5.2	NAME							j
STREET ADDRESS			5.3	STREE	T ADDRESS						
CITY-ST-ZIP				CITY-S	T-ZIP		****				
TITLE				TITLE						Change	- Addition
NAME			6.2	NAME							ł

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS