**PROFIT** CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90089 041 \*\*\*150.00

	1999	DIVISION OF C	ORPOR	ATIONS		
1. Corporation	MENT # P98000 NAME NAVIGATOR, INC.	0026394				
)	, , , , , , , , , , , , , , , , , , , ,					
Principal Plac	e of Business	Mailing Address			- 1 10011101: 115 Jerei ianu anni anni anni anna inica dinen inica sessi microssi	,
580 NW 114TH MIAMI FL 33177	AVENUE SUITE 204 2	580 NW 114TH AVENUE SUITE 204 MIAMI FL 33172			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed 03/20/1998	
2. Principal Pi	face of Business	2a. Mailing Address			4. FEI Number Applied For	믜.
21		28			650823111 Not Applicable	⊒ í
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required	╝
City & State	e	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	٦,
Zip	Country 25	Zip 29	30 Cou	ntry	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	_   `
	9, Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Registered Agent	┥
reb	ON DIANA					_
CERON, DIANA 580 NW 114TH AVENUE SUITE 204				82 Street	Address (P.O. Box Number is Not Acceptable)	- }
MIAMI FL 33172				83		┥:
				84 City	FL 85 Zip Code	11
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the State im familiar with, and secept the riplic.	02 and 607.1508, Florida Statute of Florida. Such change was au atlans of, Section 607.0505, Flori	s, the al ithorized ida Statu	bove-named by the corp utes.	I corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	-  -
SIGNATURE	Signatury, typed or printed name cylingistered ag	ent and title if applicable. (NOTE:	Registered	Agent signature	required when reinstating) DATE	ା ଛ
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	11/98
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CIRCLI VIAMORISE		· —— . — · — · · · · · · · · · · · · · ·	3351	REET ADORESS		- <u> </u>
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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 of on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

305)926.1168

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