

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra E. Martinez
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S48762**

(6)

1. Corporation Name

NATURAL HABITATS, INC.

Principal Place of Business

**12730 SW 12 CT
DAVE FL 33325
US**

Mailing Address

**12730 SW 12 CT
DAVE FL 33325
US**

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

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Zip

Country

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2a. Mailing Address

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State, Apt. #, etc.

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City & State

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Zip

Country

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g. Name and Address of Current Registered Agent

**BELL, THOMAS P.
1740 NW 122 TERR
PEMBROKE PINES FL 33026**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0122 and 607.1504, Florida Statutes, the above named corporation solemnly proclaims 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, thereby, except the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0141, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to sign this report on behalf of the corporation

Signature of the person who is authorized to sign this report on behalf of the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

JIMRUSTI, PHILLIP

☐ DELETE

NAME

12730 SW 12 CT

STREET ADDRESS

DAVE FL

CITY-STATE-ZIP

TITLE

D

JIMRUSTI, INGRID

☐ DELETE

NAME

12730 SW 12 CT

STREET ADDRESS

DAVE FL

CITY-STATE-ZIP

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-STATE-ZIP

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