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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

V00627

DOCUMENT #

1. Corporation Name

NAIK ENTERPRISES, INC.

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Principal Place of Busine	ess	Mailing	g Address							
3580 PALL MALL DE	RIVE	3580 PALL MALL DRIVE								
#1904		#1904 Jacksonville FL 32257								
JACKSONVILLE FL S	<b>.</b>				3. Date Incorporated or Qualified 3a. Date of La 12/13/1991 05/0			of Last Re 05/01/1	ast Report 01/1995	
2. Principal Place of Bus	1 4.1	20 0	4, FEI Number 59-3098900			-	Applied For			
21 3247 EMERSON STREET 26 3886 BIGGIN					ikali kd.y	1 29.2090900			<del></del>	Not Applicable
Suite, Apt. #, etc.	w /		Suite, Apt. #, etc.			5. Certificat		S8.75 Additional Fee Required		
22 JACKSON City & State		City & State			6 Election	Campaign Financing		· · · · · · · · · · · · · · · · · · ·	0 May Be	
23 FLOCIDA	28				Trust Fund Contribution					
Zip	Country	Ziç	3-1.	Countr			oration has liability to		x under s	199.032,
24 3220/	25 V·5·A	29	52224 3	0 (	1.5.A.	Florida S				
9. Nai	me and Address of Curren	t Registere	ed Agent J	81	Name		nd Address of New	Hegistereo .	Agent	
ELVING TH	ID			0		KASK	IN SH	AH P	<u></u> 'A'	
elkins, J.H. ( 6061 Merrill				63	Street Addre	ess (P.O. Box N 1 669	umber is Not Accept	able) 1 HN	J	
JACKSONVILL				83			Chene	7 610		
ONOMOGNIE						TUSV	1111			
				84	City	Ca		FL	85 21	2780
11. Pursuant to the pro-	visions of Sections 607.0502	and 607.15	508, Florida Statutes, 1	the above	named corpora	ation submits th	is statement for the p	urnose of cha	inging its r	registered office
or registered agent	or both, in the State of Florid scept the obligations of, Secti	da. Such ch	ance was authorized t	by the cor	poration's boar	rd of directors. I	hereby accept the ap	ppointment as	registered	agent. I am
2017	Pept the doingations of acco	C	DA-		RASI	X101 <	HAH	41	2019	i <b>6</b> .
SIGNATURE Signature, by	ped or printed name of registered agent	and title if applic	cable (NOT). I	Rogistered Ag	ent signature required		>T1\"'\1'\' \"	DATE	. X 4 - 2	
12.	OFFICERS AN	D DIRECTO		13.		ADDITIO	NS/CHANGES TO O			
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CITY-ST-ZIP	that the information supplied	deli. elicii e e e	as is valuated to forest	64 CITY	-ST-ZIP	for the evention	n stated in Section 1	19 07/31/b) Ele	orida Statu	rtes I further
<ul> <li>14. Foo hereby certify t</li> </ul>	that the information supplied	with this filir	ng is voluntarily turnish	CO BITTO OC	ros not quarity t	ioi ine exembro	it atated in Section 1	i a o i (a)(n), Fil	Juga Otalu	COU, I JUINIOI

roo nereby certify that the enormation supplies with this image is voluntarily furnished and does not quarry for the exemption stated in Section 113.07(3)(k). Florida Statutes, Turther 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.

SIGNATURE:

4.17.96 964.399.8399

CR2E034 (12/95)