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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Bandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V 5 2 840

Navio, Inc

Principal Place of Business

Mailing Address

P.O. 150×18491

	0, Inc	West	21M Beach FC	z e	
1651	5. Congress Ave	33416 each TC	334	3. Date Incorporated or Qualified 3a. Date of Last Report 7/22/96	
2. Principal F	lace of Business	2a. Mailing Address	1 .	4. FEI Number Applied For	
21 165			remperri	4 WY 65-035961/ Not Applical	ole
Suite, Apt.		Sulte, Apt. #, etc.		5. Certificate of Status Desired Section Fee Required	
City & Stat	Jost talm bear 12	City & State Park	<u> </u>	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
2 3,3	416 25 Florida	29 33 45 30	Country USA.	B. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
	9. Name and Address of Current R	eglatered Agent		10. Name and Address of New Registered Agent	\Box
Mane George A. Valleio					
Nelson Tibure B2 Street Address				t Address (P.O. Box Number is Not Acceptable)	\dashv
0 1 56 /3				56 18 Dewberry WAY	
,			63		
	Boyton Bewe				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement 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. I hereby accept the appointment as registered agent, I am familiar with, and accept the objections of, Section 607.0505. Florida Statutes.					
SIGNATURE					
40	Signature, typed or printed name of registered agent and OFFICERS AND D		apelered Agent signature		
112.	To ac Agus	DELETE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	Nelson Tibur	cia i	1.1 TITLE P		·
STREET ADDRESS	Delean	33437	1.3 STREET ADDRESS	George A. Valleji	l l
CITY-ST-ZIP	5394 Steven Rd	Boyton Brach FL	1.4 CITY-ST-ZIP	SEIB DOWDERY WAY 3345 FC	- [
TITLE		DELETE	2.1 TITLE	Change Additi	on i
NAME			2.2 NAME	•	j
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Additi	on .
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		L d pri stě	3.4. CITY-ST-ZIP		
TITLE		L_J DELETÉ	4.1 TITLE	Change Addition	on
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		

64 CITY-ST-ZIP

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 find accurate and that my signature shall have the same legal effect as if made under path, that I am an officer or director of the corporation of the receiver or trusted 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.

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

5.3 STREET ADDRESS

63 STREET ADDRESS

54 CITY-ST-ZIP

DELETE

DELETE

SIGNATURE:

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADORESS

197 (561) 551-560

800002085856 -02/12/97--01085--049

***165.00

Addition

FILED

Feb 11 1997 8:00am

Secretary of State