SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

CORPORATION ANNUAL REPORT
1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
94 JUL -5 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **396831** **(0)**

1. Corporation Name
SCUBA TUTORS, INC.

Mailing Address	Principal Place of Business
~~20850 S. DIXIE HWY~~	~~20850 S. DIXIE HWY~~
~~MIAMI FL 33189~~	~~MIAMI FL 33189~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/06/1972**
3a. Date of Last Report: **03/22/1993**

2. Mailing Address	2a. Principal Place of Business
21 16365 SW 280 ST	26 16365 SW 280 ST
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Homestead Florida	City & State 28 Florida Homestead
Zip 24 33031 Country 25 USA	Zip 29 33031 Country 30 USA

4. FEI Number: **59-1443111** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired: **$8.75 Additional Fee Required** ☐

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
VAN HOOK,RAYMOND W 20850 S DIXIE HWY MIAMI FL 33189	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 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 obligations of, Section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and the date of signature (If New Registered Agent is a corporation, typed name and title of officer signing)

12. OFFICERS AND DIRECTORS		13. CHANGES TO LIST OF OFFICERS AND DIRECTORS
11 TITLE	P/S/T	11 TITLE
12 NAME	VAN HOOK, SHIRLEY R	12 NAME
13 STREET ADDRESS	16365 SW 280TH ST	13 STREET ADDRESS
14 CITY ST ZIP	MIAMI, FL 00000	14 CITY ST ZIP
21 TITLE	V/D	21 TITLE
22 NAME	VAN HOOK, RAYMOND W	22 NAME
23 STREET ADDRESS	16365 SW 280TH ST	23 STREET ADDRESS
24 CITY ST ZIP	MIAMI, FL 00000	24 CITY ST ZIP
31 TITLE		31 TITLE
32 NAME		32 NAME
33 STREET ADDRESS		33 STREET ADDRESS
34 CITY ST ZIP		34 CITY ST ZIP
41 TITLE		41 TITLE
42 NAME		42 NAME
43 STREET ADDRESS		43 STREET ADDRESS
44 CITY ST ZIP		44 CITY ST ZIP
51 TITLE		51 TITLE
52 NAME		52 NAME
53 STREET ADDRESS		53 STREET ADDRESS
54 CITY ST ZIP		54 CITY ST ZIP
61 TITLE		61 TITLE
62 NAME		62 NAME
63 STREET ADDRESS		63 STREET ADDRESS
64 CITY ST ZIP		64 CITY ST ZIP

AG

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 be 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 or 617, Florida Statutes; and that my name appears in Block 11 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Shirley R Van Hook Shirley R VAN HOOK 6/28/94 305-247-1586
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR