

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90086 022 ***150.00

DOCUMENT # P96000078051

1. Entity Name

OCEAN INNOVATIONS, INC.

Principal Place of Business

**4620 HINCKLEY INDUSTRIAL PARKWAY
 CLEVELAND OH 44109**

Mailing Address

**4620 HINCKLEY INDUSTRIAL PARKWAY
 CLEVELAND OH 44109**

2. Principal Place of Business

9601 CORPORATE CIRCLE

3. Mailing Address

9601 CORPORATE CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

VALLEY VIEW OH

City & State

VALLEY VIEW OH

4. FEI Number

65-0725688

Applied For

Not Applicable

Zip

44125

Country

USA

Zip

44125

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

EVA, W. ALLAN III

500 S.W. TERRACE

SUITE B107

FT. LAUDERDALE FL 33312

7. Name and Address of New Registered Agent

EVA, W. ALLAN III

1301 RIVER REACH DRIVE, #302

FT LAUDERDALE FL 33315

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing:
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **DPT** ☐ Delete
 NAME **FABER, DAVID**
 STREET ADDRESS **1085 BALD EAGLE DRIVE**
 CITY-ST-ZIP **MARCO ISLAND FL 33969**

TITLE **DVS** ☐ Delete
 NAME **EVA, W. ALLAN III**
 STREET ADDRESS **500 S.W. TERRACE, SUITE B107**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33312**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPT** ☒ Change ☐ Addition
 NAME **FABER, DAVID**
 STREET ADDRESS **1301 RIVER REACH DRIVE #302**
 CITY-ST-ZIP **FT LAUDERDALE FL 33315**

TITLE **DVS** ☒ Change ☐ Addition
 NAME **EVA, W. ALLAN III**
 STREET ADDRESS **1301 RIVER REACH DRIVE #302**
 CITY-ST-ZIP **FT LAUDERDALE FL 33315**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **X**

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)