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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000101480 (7)

ABC DIVING INC.

Mailing Address   Mailing Address   Start N y 3 TERRACE   Start N y 4 TERRACE   Start
BOCA RATON FL 33431  BOCA RATON FL 33431-4787  3. Date Incorporated or Qualified 12/13/19986  2. Principal Place of Business  2a. Mailing Address  4. FEI Number 65 - 0 7 / 37 3 7
2. Frincipal Place of Business
2. Principal Place of Business   2a. Mailing Address   4. FEI Number   Applied For   Not Applicable
Suite, Apt #, etc.   Suite,
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.
27 City & State
City & State   Country   Zip   Zi
28   28   28   29   30   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   S. This corporation has liability for intangible tax under s. 199 032, Plorida Statutes   M2 Yes   No   No   Name and Address of Current Registered Agent   10, Name and Address of New Registered Agent   STEPHENSON, RICHARD R JR   S037 NW 3 TERRACE   82   Street Address (P.O. Box Number is Not Acceptable)
Zip
24 25 29 30 Florida Statutes
STEPHENSON, RICHARD R JR 5037 NW 3 TERRACE BOCA RATON FL 33431  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83  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 agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  84 City  85 City  86 City  87 Determined 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 agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  86 City  87 Determined 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 agent agen
STEPHENSON, RICHARD R JR 5037 NW 3 TERRACE BOCA RATON FL 33431  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, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature type for printed name of registered agent and line if applicable (NOTE Registered Agent signature required when reinstating)  DATE  OFFICERS AND DIRECTORS 1 12  DELETE 1.1 TILE   Change   Addition    NAME STEPHENSON, RICHARD R JR  5037 NW 3 TERRACE   1.3 STREET ADDRESS    EVERY STEPHENSON FROM FL 33431   1.4 CITY-ST-ZIP    DELETE   2.1 TILE   Change   Addition    NAME STEPHENSON, SHARON   22 NAME    STEPHENSON, SHARON   22 NAME   32 NAME   32 NAME   32 NAME   33 STEPHENSON, SHARON   34 DELETE   34
Street Address (P.O. Box Number is Not Acceptable)  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, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typest to provide a not registered agent and the if applicable (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TRIE D Change Addition  NAME STEPHENSON, RICHARD R JR  SIGNATURE 12 NAME  SIGNATURE 1.3 STREET ADDRESS  C IY-SI-ZIP  DELETE 1.3 TITLE Change Addition  STEPHENSON, SHARON  STEPHENSON, SHARON  C Change Addition  C Change Addition  C Change Addition  C Change Addition
BOCA RATON FL 33431  83  City  FL 85 Zip Code  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 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 arm lamil ar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed or profed ratio of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DESTREPHENSON, RICHARD R JR  SIRELLABIRESS  SIRELLABIRESS  CIY-SI-VAP  DO DELETE  1.3 STREET ADDRESS  BOCA RATON FL 33431  DELETE  21 TITLE  Change Addition
83  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 agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature tyself expinical name of registered agenciand line if applicable (NOTE Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DELETE 1.1 TITLE  STEPHENSON, RICHARD R JR  SIBELEADINESS  C IY-ST-7/P  BOOK RATON FL 33431  14 CITY-ST-7/P  DELETE 2.1 TITLE  C Change Addition
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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 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature typed to protect agent and tale if applicable (NOTE Registered Agent signature required when reinstaling)  DATE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE D Change Addition  NAME STEPHENSON, RICHARD R JR 12 NAME  SIREET ADDRESS BOOK RATON FL 33431  14. CITY-ST-ZIP  D LETE 21 TITLE Change Addition  STEPHENSON, SHARON 22 NAME
Addition  agent Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature typed to profiled name of registered agent and line if applicable   (NOTE Registered Agent signature required when reinstating)   DATE
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE D DELETE 1.1 TITLE Change Addition  NAME STEPHENSON, RICHARD R JR 1.2 NAME  STEPHENSON RICHARD R JR 1.3 STREET ADDRESS  C IY-SI-7P BOCA RATON FL 33431 144 CITY-SI-ZIP  THE D DELETE 21 TITLE Change Addition  STEPHENSON, SHARON 22 NAME
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE D DELETE 1.1 TITLE Change Addition  NAME STEPHENSON, RICHARD R JR 1.2 NAME  STEPHENSON RICHARD R JR 1.3 STREET ADDRESS  C IY-SI-7P BOCA RATON FL 33431 144 CITY-SI-ZIP  THE D DELETE 21 TITLE Change Addition  STEPHENSON, SHARON 22 NAME
THLE
STEPHENSON, RICHARD R JR   12 NAME     5037 NW 3 TERRACE   1.3 STREET ADDRESS   BOCA RATON FL 33431   1.4 CITY-ST-ZIP     TITLE   Change   Addition   CO27 NM 0 TERRACE   21 TITLE   Change   Addition   CO27 NM 0 TERRACE   22 NAME   CO27 NM 0 TERRACE   CO37 NM 0 TERRACE   Change   Addition   CO37 NM 0 TERRACE   Change   Change   Change   Change   Change   Change   Co37 NM 0 TERRACE   CO37 NM 0 TERRACE   Change   C
STREET ADDRESS   5037 NW 3 TERRACE   1.3 STREET ADDRESS
C IY-SI-7P         BOCA RATON FL 33431         14 CIY-SI-ZIP           ITTLE         D         DELETE         21 TITLE           NAME         STEPHENSON, SHARON         22 NAME
TITLE D DELETE 2.1 TITLE Change Addition NAME STEPHENSON, SHARON 22 NAME 5007 ANN 0 TERRACE
NAME STEPHENSON, SHARON 22 NAME
FOOT AND O TERRADE
POCA DATON EL 20404
GITY-ST-ZIP BOOM PRION PL 33431 2.4 CITY-ST-ZIP Change Addition
NAME 32 NAME
STREET ADDRESS  33 STREET ADDRESS
CHY-SI-7P 34.CHY-SI-7IP
THE DELETE 4.1 TITLE Change Addition
NAME 4.2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CHY - ST - ZIP 4.4 CHY - ST - ZIP
THLE DELETE 5.1 TITLE Change Addition
hAM: 52 NAME
STREEL ADDRESS 53 STREET ADDRESS
STREET ADDRESS 5.3 STREET ADDRESS
STREEL ADDRESS         53 STREET ADDRESS           CRTY-ST-ZIP         54 CITY-ST-ZIP

64 City-St-ZiP 64 Cit

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

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR

Richard Stephen Son 3/22/97 581-362-91/2

**FILED** 

Apr 07 1997 8:00am

Secretary of State

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