2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 31, 2000 8:00 am
Secretary of State
08-31-2000 90099 037 ***150.00

DOCUMENT # P98000036812

1. Entity Name

BARRY ALLISON SCUBA SALES, INC.

Principal Place of Business	Mailing Address
2207 NE 15th Court Ft. Lauderdale, FL 33304	2207 NE 15th Court Ft. Lauderdale, FL 33304

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0828190 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Allison, George B. 2207 NE 15th Court Ft. Lauderdale, FL 33304	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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, 2000 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President George B. Allison 2207 NE 15th Ct., Ft. Laud., FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

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: George B. Allison ✓ ✓
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment P98000036812
DOU 82864

JOEL SANDERS, C.P.A, P.A.
CERTIFIED PUBLIC ACCOUNTANT

1625 NORTH COMMERCE PARKWAY
SUITE 225
WESTON, FLORIDA 33326

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EMAIL: *jsand1@ix.netcom.com*

MEMBER: AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

MEMBER: FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

August 18, 2000

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Barry Allison Scuba Sales, Inc.
Document #: P98000036812
Fein: 65-0828190

Gentlemen:

Please be advised that the above referenced taxpayer has retained me to ascertain information regarding their 2000 Uniform Report, which to date has not been received. The above taxpayer's business address has changed since inception of the corporation.

We are enclosing a check, in the amount of $150.00, along with an application for the above entity. Please make note of the current mailing address for any correspondence.

Please review our file and advise us accordingly.

Very truly yours,

Joel Sanders, CPA