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APPROVED
AND
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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

95 APR 14 PM 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 689772

(2)

1. Corporation Name

THE WET WORLD, INC.

Principal Place of Business

19759 LOXAHATCHEE RIVER RD
JUPITER FL 33458
US

Mailing Address

19759 LOXAHATCHEE RIVER RD
JUPITER FL 33458
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
09/30/1980

3a. Date of Last Report
05/01/1994

4. FEI Number
59-2053514

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

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

2. Principal Place of Business

21 2101 Indian Road

2a. Mailing Address

26 115 LANDWARD DAIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 West Palm Beach, FL

City & State

28 Jupiter, FL

Zip 33409

Country P.B.

Zip 33477

Country P.B.

9. Name and Address of Current Registered Agent

HOERBER, DENNIS K.
19759 LOXAHATCHEE RIVER RD
JUPITER FL 33458

10. Name and Address of New Registered Agent

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 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, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE CDP
NAME HOERBER, DENNIS K.
STREET ADDRESS 19759 LOXAHATCHEE RIVER RD
CITY - ST - ZIP JUPITER FL

TITLE SDT
NAME HOERBER, KATHLEEN F.
STREET ADDRESS 19759 LOXAHATCHEE RIVER RD
CITY - ST - ZIP JUPITER FL

TITLE VPD
NAME HOERBER, DOUGLAS K.
STREET ADDRESS 2553 DONNELLY DR
CITY - ST - ZIP LANTANA FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CDP ☒ Change ☐ Addition
1.2 NAME HOERBER, DENNIS K.
1.3 STREET ADDRESS 115 LANDWARD DAIVE
1.4 CITY - ST - ZIP JUPITER, FL 33477

2.1 TITLE SDT ☒ Change ☐ Addition
2.2 NAME HOERBER, KATHLEEN F.
2.3 STREET ADDRESS 115 LANDWARD DAIVE
2.4 CITY - ST - ZIP JUPITER, FL 33477

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME DELETED - NO LONGER
ON THE BOARD OR WITH
THE COMPANY
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 110.07(3)(k), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Dennis K. Hoerber, President 2/26/95 (407) 746-3366

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Signature (Please Print)