2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Aug 21, 2006 8:00 am Secretary of State DOCUMENT # F03000004070 1. Entity Name 08-07-2006 90043 043 \*\*\*150.00 SUBMERGE, INC. 08-21-2006 90001 030 \*\*\*400.00 Principal Place of Business Mailing Address 12664 154TH ROAD NORTH PO BOX 7586 JUPITER FL 33468 JUU43622 JUPITER FL 33478 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/06) City & State City & State Applied For 23-3047514 Not Applicable Zρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NAIRNE, RODNEY Street Address (P.O. Box Number is Not Acceptable) 12664 154TH ROAD NORTH JUPITER FL 33478 City Zip Code 6. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE 70nne (NOTE: Pegistered Agent signature required who FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be :DUE BY September 6, 2006 late lee. By checking this box, the corporation certifies it did Trust Fund Contribution. Make Check Payable to Florida Department of State not receive prior notice. Fee to fife is \$150.00. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Vice President TILLE Delete Addition Change NAIRNE, RODNEY Nairne, Rodney 18591 131ST TRAIL North NAME MASS 12664 154TH BOAD NORTH STREET ADDRESS SIREET ADDRESS JUPITER FL 33478 CTTY+ST-74P Jupiter FL 33478 CDY-SI-78 President TITLE Delete TITLE Change Addition Dudas, Suzanne 18591 131ST Trail North DUDAS, SUZANNE NAME NAME 12664 154TH ROAD STREET ADDRESS STREET ADDRESS JUPITER FL 33478 CITY-ST-ZP CITY-S1-ZIP Jupiter, FL 33478 TIFLE ☐ Defeta TIFLE ☐ Change ☐ Addition NAME NUME STREET ADDRESS STREET ADDRESS CITY - ST - 71P CITY-ST-7P TITLE Delete THE Chance Addation NAME STREET ADDRESS STREET ADDRESS CITY-ST-70 CITY-ST-71P Delete IIILE ☐ Change ☐ Addition NAME STREET ADDRESS SIRFET ADORESS CTTY - ST - ZTP TITLE ☐ Delete TITLE ☐ Change Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP 12. I hereby certify that the information supplied with this fifing does not qualify for the exemptions contained in Chapter 119. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. Suzanne SIGNATURE: