## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPO ANNUA	ROFIT ORATION JL REPORT 996	FLORIDA DEPART Sandra B Secretary DIVISION OF CO	Mortham = of State		
DOCUM 1. Corporation N NEKTON	ENT # <b>F93000</b> I DIVING CRUISES, INC.	004980 (9)			
Principal Place of Business Mailing Address  1057 SE 17TH STREET 1057 SE 17TH STREET STE 202 FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 3			33316	3. Date Incorporated or Qualified 11/03/1993 3a. Date of Last Report 04/18/1995	
2. Principal Place		2a. Mailing Address 26 <b>520 56</b>	32nd 51	4. FEI Number 65-0444701	Applied For Not Applicable
Suite, Apt. #,		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	AUDERDALE FL	City & State 28 F1. LAUDE	RONE FL		\$5.00 May Be Added to Fees
23 FT. K 24 333	Country 25 BROWARD	Zip 29 33316	Country 30 BROWAR	8. This corporation has liability fo Florida Statutes	s No
24 225	g. Name and Address of Current			10. Name and Address of New	Registered Agent
DIXON, JOHN D 1057 SE 17TH STREET STE 202			<ul><li>81 Name</li><li>82 Street Add</li><li>83</li></ul>	dress (P.O. Box Number is Not Accepta	able;
	UDERDALE FL 33316		84 City		FL 85 Zip Code
or registere familiar with	id agent, or both, in the State of Florida, and accept the obligations of Section Spanie types a project where of regree competers	h 607.0505, Fiorida Statutes	s, the above named corporation's both the corporation's both the corporation's both the corporation and the corporation are corporation.	හරුණු ලා මණක්රවල්	
12.	OFFICERS AND	DELETE	1. 1 TITLE		Change Addition
NAME STREET ADDRESS	DIXON, JOHN D 1057 SE 17TH STREET, SUITI	E 202	1.2 NAME 1.3 STREET ADDRESS		FFICERS AND DIRECTORS IN 12  Change Addition
CITY - ST ZIP	FORT LAUDERDALE FL	☐ DELETE	14 CITY - ST - ZIP 2 1 TITLE		Change Addition
TITLE NAME STREET ADDRESS	ZING, GREGORY L P.O. BOX 3090 MA		2.2 NAME 2.3 STREET ADDRESS		
City-St-Zip	BOYNTON BEACH FL		2 4 CITY - S1 - Z-P		Change Addition
TITLE NAME STREET ADDRESS	V HERMAN, PETER C 2420 SE 17TH ST #205C	☐ DELETE	3 1 TITLE		
COY-SI-ZIF	FT. LAUDERDALE FL	DELETE	3.4 CITY - ST - 7 P 4.1 TIFLE		Change Addition
TITLE NAME STREET ADDRESS	S OETZMAN, LYNN A 900 RIVER REACH DR #571		4.2 NAME 4.3 STREET ADORESS		
CITY-ST-ZIP TITLE NAME STREET ADDRESS	FT. LAUDERDALE FL	☐ DELETE	4.4 CITY - ST - ZiP 5.1 TILLE 5.2 NAME 5.3 STREET ADDRESS	1 0000 1 7 -04/19/960 ***200.00	"873号 <sup>©</sup> Enge □ Addition 1061018
CITY-ST-ZIP TITLE NAME		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME		Change Addition

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 offect 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.

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

STREET ADDRESS

Secretary
Signature and typed or printed name of Signing Officer Officer of Director