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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

FILED

Jan 27 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F93000004980 (9)

1. Corporation	N DIVING CRUISES, INC.	(0)	,							
NEICIC	A DIVING CHOIDED, INC.					A INDIANO TELS ANION STATE SMIFL WHILL WOLLD US 150 ROLE	i Biblib i	REEF IN	IAN NUMBER FRANT	
Principal Place of Business Mailing Address							 	61 M 1 3 M 1	131 # 032 1 8 01	
520 SE 32ND STREET 520 SE 32ND STREET										
FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 333						DO NOT WRITE IN THIS S	PACE			
						3. Date Incorporated or Qualified	FACE			丁
						11/03/1993				ŀ
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	\neg	AF	plied For	+
21		26				65-0444701			t Applicable	e
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		-	Additional	
22 City & Ctat		27	27 City & State						equired	4
City & Stat	e	⊢	⊢ ' '			6. Election Campaign Financing Trust Fund Contribution			Мау Ве	
Zip	Country	28 Zip	Zip Country			Trust Fund Contribution This corporation owes or has paid the current of the current o			to Fees	\dashv
24	25	29	30	,			Yes		angible] No	
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered A				
DIX	(ON, JOHN D			81	Name					1
	D SE 32ND DT		82			ess (P.O. Box Number is Not Acceptable)				\dashv
F0	RT LAUDERDALE FL 33316									╛
				83						
				84	City	FL	85	Zip (Code	٦
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1508 Florida State	itee the a	bove	e-named corn		chanc	ina it	o rogiotorod	
office or r	egistered agent, or both, in the State	of Florida, Such change was	authorize	d by	the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appr	intme	nt as	registered	
	m lamiliar with, and accept the oblig	ations of, Section 607.0505, F	iorida Ştai	uies	Ş.					
SIGNATURE	Signature, typed or printed name of registered age	ent and title # applicable. (NC	TE: Registere	d Age	ent signature require	ed when reinstating) DATE				۔ ا
12.		D DIRECTORS				ADDITIONS/CHANGES TO OFFICERS AND	_]
TITLE	PV IOUN D	☐ DELETE	1,1 ∏	TLE			Cha	ange	Addition	1 3
NAME	DIXON, JOHN D 520 SE 32ND STREET		1.2 N							9
STREET ADORESS	FORT LAUDERDALE FL				ADDRESS					į
CITY-ST-ZIP	CT CT	DELETE	2.1 TI	***	T-ZIP		Cha	пле	Addition	-16
NAME	ZING, GREGORY L		2.2 N/					, igo		
STREET ADDRESS	P.O. BOX 3090 (NA)				ADDRESS					
CITY-ST-ZIP	BOYNTON BEACH FL		2. 4 CiTY-							
TITLE	\$	☐ DELETE				* .,	Cha	пде	Addition	╗
NAME	DIXON, LYNN O		3.2 NAME		ļ					
STREET ADDRESS	520 SE 32ND STREET		3.3 \$1	REET	ADDRESS					
CITY - ST - ZIP	FT. LAUDERDALE FL				ST-ZIP				,	4
TITLE		☐ DELETE	4.1 TT				L Cha	nge	Addition	1
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET 4.4 CITY - S							
CITY-ST-ZIP TITLE		DELETE	4.4 GI 5.1 TI		r-zip		Cha	DOE.	Addition	\exists
NAME			5.1 N				5110	90	/ NORNOTI	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			5.4 Cf							
TITLE		☐ DELETE	6,1 Ti				Cha	пде	Addition	7
NAME			6.2 NA	ME						
STREET ADDRESS			6.3 ST	REET .	ADDRESS					
CITY-ST-ZIP		The second secon	6.4 CITY - ST - ZIP							
14. Thereby o	ertity that the information supplied w	ith this filing does not qualify	for the exe	mpt	tion stated in S	Section 119.07(3)(i), Florida Statutes. I further cer	tify the	t the	information	ļ

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: