

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002227

1. Entity Name

RIPLEY'S AQUARIUM (MYRTLE BEACH) INC.

**FILED**  
**Apr 25, 2000 8:00 am**  
**Secretary of State**

04-25-2000 90071 030 \*\*\*150.00

Principal Place of Business Mailing Address  
1600 - 1055 W. HASTINGS ST 1600 - 1055 W. HASTINGS ST  
VANCOUVER, BC V6E 2H2 VANCOUVER, BC V6E 2H2

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 57-1026842 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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 D ☐ Delete  
NAME BERGEN, ROD  
STREET ADDRESS 24675 - 16TH AVENUE  
CITY-ST-ZIP LANGLEY BC V2Z- 1J4

TITLE SD ☐ Delete  
NAME DESMARAI, NICK  
STREET ADDRESS 2592 BELLOC STREET  
CITY-ST-ZIP NORTH VANCOUVER, BC V7H 131

TITLE D ☒ Delete  
NAME SCHELLENBERG, DAVID  
STREET ADDRESS 2185 140A ST  
CITY-ST-ZIP SOUTH SURREY, BC V4A 9R8

TITLE P ☐ Delete  
NAME MASTERSON, ROBERT E  
STREET ADDRESS 700-5728 MAJOR BOULEVARD  
CITY-ST-ZIP ORLANDO FL 32819

TITLE VT ☐ Delete  
NAME DESKA, NORMAN F  
STREET ADDRESS 5157 TIMBERVIEW TERR.  
CITY-ST-ZIP ORLANDO FL 32819

TITLE V ☐ Delete  
NAME PATTISON, JIM JR  
STREET ADDRESS 700-5728 MAJOR BLVD.  
CITY-ST-ZIP ORLANDO FL 32819

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME KORENBERG, MICHAEL  
STREET ADDRESS 1600-1055 W. Hastings St.  
CITY-ST-ZIP VANCOUVER, BC V6E 2H2

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 10/2000

Date

604-688-6764

Daytime Phone #

CR2E034 (9/99)