## 2003 FOR PROFIT CORPORATION

## **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

RIPLEY'S AQUARIUM (MYRTLE BEACH) INC.



Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91859 001 \*\*\*600.00

**FILED** 

F95000002227 1. Entity Name Principal Place of Business Mailing Address

1600 - 1055 W. HASTINGS ST VANCOUVER, BC V6E 2H2		1600 - 1055 W. HASTINGS ST VANCOUVER, BC V6E 2H2							
2. Principal Place of Business		3. Mailing Address		_				50    51	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State		4.	FEI Number <b>57-1026842</b>	1	Applied For Not Applicable		
Zip		Country	Zip	Country	5.	Certificate of Status Desired		8.75 Ac ee Requir	
	6. Name a	nd Address of Current F	Registered Agent		7.	Name and Address of New R	egistered A	gent	
				Name					
C T CORPORATION SYSTEM			Street Address		Address (P.O.	Box Number is Not Acceptable	<u> </u>		
1200 SOUTH PINE ISLAND ROAD							, 		
PLANTAT	10N FL 33324	1						T	
				City			FL	Zip Cod	de
8. The above	e named entity :	submits this statement for	the purpose of changing its	registered office	or registered a	gent, or both, in the State of Flo	rida. I am fa	miliar with,	and accept
the obligat	itions of register	ed agent.				•			·
SIGNATURE	Signature typed or	printed name of registered agent a	nd litle if applicable (NOT	E: Registered Agent sign	lature required when	reinstation)	DATE		
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						T			
ິ Afte	r May 1, 2003	FEE IS \$150.00 Fee will be \$550.00 Florida Department of	State			Election Campaign Fin.     Trust Fund Contribution	, –		00 May Be
ິ Afte	r May 1, 2003	Fee will be \$550.00		11.	A	' "	n.	Adde	d to Fees
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Afte Make Check  10.  TITLE NAME	Pr May 1, 2003 k Payable to I	Fee will be \$550.00 Florida Department of OFFICERS AND D	DIRECTORS	TITLE NAME		Trust Fund Contribution	n.	Adde	d to Fees
Afte Make Check  10.  TITLE NAME STREET ADDRESS	D BERGEN, R 24675 - 161	Fee will be \$550.00 Florida Department of OFFICERS AND D  OD TH AVENUE	DIRECTORS	TITLE NAME STREET ADDRESS		Trust Fund Contribution	n.	Adde	d to Fees
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other lik

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: .

PATTISON, JIM JR

700-5728 MAJOR BLVD.

ORLANDO FL 32819

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Change

☐ Addition