

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 19 1998 8:00am
Secretary of State

DOCUMENT # F95000005799 (0)

1. Corporation Name
OCEAN RESOURCES, INC.

Principal Place of Business

350 EIGHTH AVENUE, SE
ST. PETERSBURG FL 33071

Mailing Address

350 EIGHTH AVENUE, SE
ST. PETERSBURG FL 33071

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified 11/29/1995	
4. FEI Number 06-1141757	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MULOCK, DAVID G 1 PROGRESS PLAZA SUITE #2300 ST. PETERSBURG FL 33701		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		(NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS					
TITLE	CS	X DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	RILEY, RONETTE J			1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	1 PROGRESS PLAZA STE 2300			1.2 NAME	
CITY-ST-ZIP	ST PETERSBURG FL			1.3 STREET ADDRESS	
TITLE	P	<input type="checkbox"/> DELETE		1.4 CITY-ST-ZIP	
NAME	WINSTON, MARTIN D			2.1 TITLE C/P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	1 PROGRESS PLAZA STE 2300			2.2 NAME WINSTON, MARTIN D	
CITY-ST-ZIP	ST PETERSBURG FL			2.3 STREET ADDRESS 1 PROGRESS PLAZA SUITE 2300	
TITLE	V	<input type="checkbox"/> DELETE		2.4 CITY-ST-ZIP ST PETERSBURG FL	
NAME	WENTLAND, MICHAEL			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	1 PROGRESS PLAZA STE 2300			3.2 NAME	
CITY-ST-ZIP	ST PETERSBURG FL			3.3 STREET ADDRESS	
TITLE	T	<input type="checkbox"/> DELETE		3.4 CITY-ST-ZIP	
NAME	MORRIS, JASON R			4.1 TITLE S/T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	1 PROGRESS PLAZA STE 2300			4.2 NAME MORRIS, JASON R	
CITY-ST-ZIP	ST PETERSBURG FL			4.3 STREET ADDRESS 1 PROGRESS PLAZA SUITE 2300	
TITLE	V	<input type="checkbox"/> DELETE		4.4 CITY-ST-ZIP ST PETERSBURG FL	
NAME	BROCK, DAVID R.			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	1 PROGRESS PLAZA STE 2300			5.2 NAME	
CITY-ST-ZIP	ST PETERSBURG FL			5.3 STREET ADDRESS	
TITLE		<input type="checkbox"/> DELETE		5.4 CITY-ST-ZIP	
NAME				6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS				6.2 NAME	
CITY-ST-ZIP				6.3 STREET ADDRESS	
				6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *David R. Brock* 3-10-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0368867

CP2E034 (10/97)