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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation		98 (9)			
AQUAT	TIC ENTERPRISES, INC.			0 180 (1171 BARR (1188 2812) (1820 A	ANDA KANT BYAYA ANDAN ANDAN ANDAN BUBUK NADA
Principal Place	of Business	Mailing Address		1	
% DONALD R. TRENT 1201-A HWY. 98 E. FT. WALTON BEACH FL 32548		% DONALD R. TRENT 1201-A HWY, 98 E.			
		FT. WALTON BEACH	1 FL 32548	3. Date Incorporated or Qualified	3a. Date of Last Report 04/17/1995
2. Principal Place of Business		2a. Mai⊩ng Address		05/12/1983 4. FET Number	Applied For
1		26		59-2296153	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Gertificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip 4	Country 25	Z _I p 29	Country 30	Florida Statutes 📝 Y	or intangiti√e tax under s. 199.032, os. □ No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New	Registered Agent
TRENT.	DONALD R.			ress (P.O. Box Number is Not Accept	ablo)
	HWY. 98 E.		<u> </u>		
FT. WAL	TON BEACH FL 32548		83		
			84 City	.,	FL 85 Zip Code
or registere	o the provisions of Sections 607.050 ad agent, or both, in the State of Flor h, and accept the obligations of, Sec	rida. Such change was author	rized by the corporation's boa	ration submits this statement for the p rd of directors. Thereby accept the a;	curves of changing its registered office
SIGNATURE _	Signature, typed or printed name of registered age	it and title if anylicable (*)	NOTE: Registered Agent signature reuline	discher ten statu a	(JAIL
12.		ND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
TITLE	DP	DEFETE	1 1 Title		Change 🔲 Addition
NAME Proces Leadness	TRENT, DONALD R		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	951 POCAHONTAS DR FT WALTON BCH, FL 00000	n '	1.3 STREET ACCIDIESS 1.4 CPY - SY - 7P2	32547	
TITLE	TT WALTON DOIN, TE GOOD	DELETE	2 1 11!LF		Change Addition
NAME			2.2 NAME		
STHEET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 C(TY - S' - 7)P		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME		,	3 2 NAME		
STREET ADDRESS			3.3 SIREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	34 CHY-ST-7if'		Change Addition
NAME		<u></u>	4.2 NAMi		
STREET ADDRESS			4.3 STREET ADDRESS		
C(TY-\$1-24P			4.4 CHY+S1+ZIP		
TITLE		☐ DELETE	5 11/11/		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY-ST-ZIP			54CHY ST-ZIF		
THILE		DELETE	6 171111		Change Addition
					l l
i			6.2 NAME		
NAME STREET ADDRESS DITY-ST-ZIP			6.2 NAME 6.3 STREET ADDRESS 6.4 CHY+SI-ZIP		

certify that the minormation indicated on this annual report or supplemental annual report is tree and outlined and that my signature sharmace the same eight enect as 1 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-96 904-243-5721