

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G39481

FILED
Apr 17, 2005
Secretary of State

Entity Name: R J DIVING VENTURES, INC.

Current Principal Place of Business:

5352 PINE TREE DR
MIAMI BCH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

5352 PINE TREE DRIVE
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 59-2293104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNOVE, ROBERT J.
5352 PINE TREE DRIVE
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARNOVE, ROBERT J.,
Address: 5352 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL

Title: VP () Delete
Name: BEACH, MICHAEL J
Address: 5352 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARNOVE, ROBERT J.,
Address: 5352 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC () Change (X) Addition
Name: WINSLOW-ARNOVE, DONNA A
Address: 5352 PINE TREE DRIVE
City-St-Zip: MIAMI BEACH, FL 33140 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT J. ARNOVE

PD

04/17/2005

Electronic Signature of Signing Officer or Director

Date