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

DOCUMENT #

H35661

(8)

SUBSEA AQUATICS, INC.

FILED Feb 24 1998 8:00am Secretary of State

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Principal Plac	e of Business	Mailing Address				\$ (EBLA)(BIÁR (ILD) AILIR BLICA AILIR	fill Blifit Athli Athli bibli di	BII BIYI 1881	
18767 US 1 TEQUESTA FI	L 334 69	319 NEIOH RD. TEOUESTA FL 33469	TEODESTA FL 33469			DO NOT WRITE IN THIS SPACE			
US		9436 SERIV	SE River Terrace			3. Date Incorporated or Qualified			
		Teaucsty 5	-			12/27/1984			
2. Principal P	11 22	(07		12/21/1904 4. FEI Number		Applied For			
21		26	2a. Mailing Address			59-2494818	 	ot Applicable	
Suite, Apt.	Suite, Apt. #, etc.	ite, Apt. #, etc.			*	\$8.75	Additional		
22		27	,]			5. Certificate of Status Desired	Fee F	Required	
City & State	9	City & State	City & State			6. Election Campaign Financing	\$5.00	May Be	
23	28					Trust Fund Contribution			
Zip	Country	Zιρ	Count	iry		8. This corporation owes or has paid the current year Intangible			
24 25 29			30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
	g. Name and Address of Curre	nt Registered Agent		1 Na	ame	10. Name and Address of New A	egistered Agent		
HA	RRIS, STEVEN A.	1 T	Ľ						
316	HEIGH RD. 9434 58	kiver len	8	2 Str	reet Addre	ss (P.O. Box Number is Not Accepta	ıble)		
TE	QUESTA FL 33458-3346		-	3					
			Ľ	~					
			8	4 Cii	ty		F1 85 Zip	Code	
44 Pursuant	to the provisions of Sections 607.050	2 and 607 1508. Florida Statu	ites the abo	ve-na	med corpo	ration submits this statement for the	purpose of changing	its registered	
office or a	egistered agent, or both, in the State	e of Florida. Such change was	authorized	by the	corporatio	n's board of directors. I hereby acce	opt the appointment a	s registered	
agent. La	m familiar with, and accept the oblig	jations of, Section 607.05 0 5, F	iorioa Statui	es.					
SIGNATURE	Signature, typed or printed name of rugistered ag	ent and title if applicable (NO	TE Registered A	gia trepA	nature required	when reinstating)	DATE		
12.		D DIRECTORS	13.	<u> </u>		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	PRS IN 12	
TITLE	Р	DELETE	1.1 TITU	E			☐ Change	Addition	
NAME	HARRIS, STEVEN A.	00 0 L No.	1.2 NAM	AE .					
STREET ADDRESS	HARRIS, STEVEN A 9436 BE River terraca			1.3 STREET ADDRESS				ļ	
CITY-ST-ZIP	TEQUSTA FL 33469		1.4 CITY	- ST- ZIP					
TITLE	ST	☐ DEL ete	2.1 TITU	E			Change	L_J Addition	
NAME	HARRIS, SANDRA J.	. O t	2.2 NAM	E					
STREET ADDRESS	SID LEIGHT RD. 9434 St	e iciver tempore	2.3 STRE	ET ADDR	ESS			ŀ	
CITY-ST-ZIP	TEQUSTA FL 33469			r - ST - ZIF	·		Chanca	Addition	
TITLE		☐ DEL ete	3.1 TITL				Change	Agoigton	
NAME			3.2 NAM						
STREET ADDRESS				ET ADDR	1 1				
CITY-ST-ZIP		DELETE	3.4. CITY 4.1 TITL	/-ST-ZIF	1		Change	Addition	
TITLE		C) ottett	4.1 IIIL				change		
NAME					2500				
STREET ADDRESS				EET ADDR					
CITY-ST-ZIP		DELETE	5.1 TITL	'-ST-ZIP F			Change	Addition	
TITLE NAME			5.2 NAM						
STREET ADDRESS				EET ADDR	RESS			ļ	
•				-ST-ZIP				ŀ	
CITY-ST-ZIP TITLE		DELETE	6.1 TITL			1. W-1.	Change	☐ Addition	
NAME			6.2 NAM			70000243 -02/25/98010	39967 /	20	
STREET ADDRESS				eet addf	RESS	-02/25/98010	107012 ス	2.24	
CITY-ST-ZIP				- ST - ZIP	1 1	***150.00		- 27	

14. Thereby 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.