

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H65622** (3)
1. Corporation Name
HYPERBARICS INTERNATIONAL, INC.



Principal Place of Business Mailing Address
% DICK RUTKOWSKI
490 CARIBBEAN DRIVE
KEY LARGO FL 33037

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 Country 29 Zip Country 30
24 25 29 30

3. Date Incorporated or Qualified **07/10/1985** 3a. Date of Last Report **03/17/1995**
4. FET Number **59-2615759** Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
RUTKOWSKI, RICHARD L
490 CARIBBEAN DR.
KEY LARGO FL 33037

10. Name and Address of New Registered Agent
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 607.1503, 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

Signature of person making this statement

Signature of Registered Agent (Signature required only if changed)

DATE

12. OFFICERS AND DIRECTORS
1. TITLE ☐ DELETE
NAME **PST**
STREET ADDRESS **RUTKOWSKI, RICHARD L**
CITY-ST-ZIP **490 CARIBBEAN DR**
KEY LARGO FL 33037
2. TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **RUTKOWSKI, RICHARD L**
CITY-ST-ZIP **490 CARIBBEAN DR**
KEY LARGO FL 33037
3. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
4. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
5. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
6. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE ☐ Change ☐ Addition
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP ☐ Change ☐ Addition
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP ☐ Change ☐ Addition
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP ☐ Change ☐ Addition
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP ☐ Change ☐ Addition
17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP ☐ Change ☐ Addition
21. TITLE
22. NAME
23. STREET ADDRESS
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27. STREET ADDRESS
28. CITY-ST-ZIP ☐ Change ☐ Addition
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91. STREET ADDRESS
92. CITY-ST-ZIP ☐ Change ☐ Addition
93. TITLE
94. NAME
95. STREET ADDRESS
96. CITY-ST-ZIP ☐ Change ☐ Addition
97. TITLE
98. NAME
99. STREET ADDRESS
100. CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 registered agent or authorized person empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or, if changed, in or attached hereto with an address.

SIGNATURE: **Richard Lee Rutkowski, Pres.** March 9, 1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-451-2551

CR2E034 (12/95)