FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (8)J07312 OCEAN HOLDINGS, INC. Principal Place of Business Mailing Address 1100 LINTON BLVD P O BOX 4727 SUITE C9 PORTSMOUTH NH 03802 DELRAY BEACH FL 33444 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/02/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1000 Market St 59-2653863 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be **Yortsmouth** 28 Trust Fund Contribution Added to Fees 23 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CRITCHFIELD, RICHARD H. 1100 LINTON BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE C-4 DELRAY BEACH FL 33444** 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** Signature, typed or printed name of registered agent and bite if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition WALSH, MARK Walsh, Mark MALAF 1.2 NAME 1100 LINTON BLVD STE C9 1100 Linton Blud, Stell STREET ADDRESS 1.3 STREET ADDRESS **DELRAY BEACH FL** Delray Beach FL 33444 CITY-ST-7IP 1.4 City-St-7IP DELETE Change TITLE 21 TITLE Critchfield, Richard, Ste C4 CRITCHFIELD, RICHARD NAME 2.2 NAME 1100 LINTON BLVD STE C4 STREET ADDRESS 2.3 STREET ADDRESS **DELRAY BEACH FL** FL 33444 Delray Beach CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition 4.1 TIFLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME

CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 free 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 as attachment with an address.

5.3 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

3/17/98

CR2E034 (10/97

Change

Addition