

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J76517

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** NEAL WATSON'S UNDERSEA ADVENTURES, INC.

**Current Principal Place of Business:**

2101 S ADREWS AVE  
STE 201  
FORT LAUDERDALE, FL 33316 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 21766  
FT. LAUDERDALE, FL 33335 US

**New Mailing Address:**

**FEI Number:** 65-0002561

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATSON, NEAL  
2101 S ADREWS AVE  
STE 201  
FORT LAUDERDALE, FL 33316 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: DPT ( ) Delete  
Name: WATSON, NEAL,  
Address: 1543 S.W. 24TH STREET  
City-St-Zip: FT. LAUDERDALE, FL

Title: DVS ( ) Delete  
Name: WATSON, DEBRA BETH  
Address: 1111 SW 129 WAY  
City-St-Zip: DAVIE, FL 33325

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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:** NEAL WATSON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DPT

04/26/2006

\_\_\_\_\_  
Date