FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # LO

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CONTINENTAL SEA PRODUCTS, INC.

FILED Jan 29 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address				1 100/30/4 0/4 00/0/ 1/0/4 0/4 0/4		OLDIN BIBIN OKON	
% WARD B. LAFRANCE 13191 STARKEY RD SUITE 7 LARGO FL 33773 US		% WARD B. LAFRANCE 13191 STARKEY RD SUITE 7 LARGO FL 34643 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
		••				07/10/1989			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				59-2958749			ot Applicable
Suite, Apt.	#, e1C.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	
City & State		City & State	City & State			6. Election Campaign Financing		\$5.00	
23		28	28			Trust Fund Contribution		Added t	
Zip	Zip Country Zip		7.3 Country			This corporation owes or has p Personal Property Tax due Jun	_		angible No
24	g. Name and Address of Current		<u> </u>			10. Name and Address of New R			· 140
.] Δ\$	RANCE, WARD 8.								
13191 STARKEY ROAD SUITE 7					et Address (P.O. Box Number is Not Acceptable)				
					- Addies	as (i .o. box riginiber is riot ricocpic			
LARGO 33773				3					
			8	4 City				85 Zip (Code
	10	1007 4600 Ft. id. 0					FL		
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 regist 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 registed									registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE .	Signature, typed or printed name of registered agen	Ingistered A	gent signatur	e required	wher: reinstating)	DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	IS IN 12
TITLE	<u></u>		1.1 TOTLE	1.1 TITLE DIR		ECTOR, PRESIDENT, SECRETIAN		Change	Addition
NAME LAFRANCE, WARD B.		1.3 \$		3 STREET ADDRESS		SECRETIAR	1, IRE	MSUKE	
STREET ADDRESS 13191 STARKEY RD SUITE 7								22	773
CITY-ST-ZIP TITLE			1.4 CITY 2.1 TITLE					Change	Addition
NAME		E_1 present	2.1 HILE					☐ Ollange	C Roullon
STREET ADDRESS			2.3 STREET ADDRESS						
STREET AUDRESS CITY-ST-ZIP			2. 4 CITY - ST - ZIP						
TITLE		☐ DELETE						Change	Addition
NAME			3.2 NAME						
STREET ADDRESS	signi su		3.3 STRE	ET ADDRESS					
CITY-ST-ZIP		······································	3.4 CITY	- S1 - ZIP	<u> </u>				
TITLE		☐ DELETE	4.1 (1116		1			Change	
NAME			4. 2 NAM						
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP						
CITY-ST-ZIP TITLE			5.1 TITLE		ļ.			Change	Addition
NAME		Deterio	5.2 NAMI						
STREET ADDRESS			F	ET ADDRESS					
CITY-ST-ZIP			5.4 CITY						
TITLE		DELETE	61 TITLE					Change	Addition
NAME			6.2 NAMI	E					
STREET ADORESS			6.3 STRE	ET ADDRESS					
CITY-ST-ZIP			64 CHTY	 	<u>l.</u>		. ,		
14 I hereby o	ertify that the information supplied wit	th this filing does not qualify for t	ine exem	iption stat	ea in Si	ection 119.07(3)(i), Florida Statutes.	trurther ce:	any that the	⊰ntormation I

14. I hereby 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 repeiver 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 chapted or pn an all chiment with an address.

SIGNATURE: MUND Ward B. La Fran

1/23/48(813)535-7511