

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 SEP -9 AM 10:15

DOCUMENT # L21600

1. Corporation Name

Buzbee Aquatics, Inc.

96-AR
CM

9000001951119
-09/19/96--01012--006
****225.00 ****225.00

Principal Place of Business

10526 Moody Rd.
Riverview, FL 33569

Mailing Address

P.O. Box 2021
Riverview, FL 33569

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Spencer Buzbee
P.O. Box 2021 11706 Rhodine Rd
Riverview, FL 33569

81 Name Spencer Buzbee

82 Street Address (P.O. Box Number is Not Acceptable)

83 11706 Rhodine Rd.

84 City Riverview

FL

85 Zip Code 33569

11. Pursuant to the provisions of Sections 607.0501 or registered agent, or both, in the State of Florida, I am familiar with, and accept the obligation of, 1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office. 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 12a changed, or on an attachment with an address.

SIGNATURE

Spencer Buzbee

8/12/96

12. OFFICERS AND DIRECTORS

TITLE President
NAME Spencer Buzbee
STREET ADDRESS P.O. Box 2021
CITY-ST-ZIP Riverview, FL 33569

TITLE President
NAME SPENCER BUZBEE
STREET ADDRESS 11706 Rhodine Rd.
CITY-ST-ZIP RIVERVIEW, FL 33569

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 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 12a changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/12/96

Signature Page #

CR2E034 (12/95)