SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 26 PM 2:21

DOCUMENT # L92995 **(4)**

1. Corporation Name
C.A.D.I. DIVE SHOP, INC.

Principal Place of Business	Mailing Address
10550 NW 77 COURT #204 HIALEAH GARDENS FL 33016	10550 NW 77 COURT #204 HIALEAH GARDENS FL 33016

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 08/15/1990	3a. Date of Last Report: 06/09/1994
4. FEI Number: 65-0212168	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~SANCHEZ, CARMAD~~ ~~481 WEST 30 PLACE~~ ~~HIALEAH FL 33012~~	81 Name: Valdes Darlin 82 Street Address (P.O. Box Number is Not Acceptable) 83: 8201 NW 182 ST 84 City: Palm Spring FL 85 Zip Code: 33015

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: Darlin Valdes 6-15-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	VALDES, DARLIN	12 NAME	
STREET ADDRESS	8201 NW 182ND ST.	13 STREET ADDRESS	
CITY-ST-ZIP	PALM SPGS. NORTH FL	14 CITY-ST-ZIP	
TITLE	T	21 TITLE	TS ☐ Change ☐ Addition
NAME	~~VALDES, SERGIO~~	22 NAME	Valdes Sergio
STREET ADDRESS	~~8201 NW 182ND ST.~~	23 STREET ADDRESS	8201 NW 182 ST
CITY-ST-ZIP	~~PALM SPGS. NORTH FL~~	24 CITY-ST-ZIP	Palm Spring North FL 33015
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	~~SANCHEZ, CARMAD~~	32 NAME	
STREET ADDRESS	~~481 WEST 30 PLAC E~~	33 STREET ADDRESS	
CITY-ST-ZIP	~~HIALEAH FL~~	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
		62 NAME	
		63 STREET ADDRESS	
		64 CITY-ST-ZIP	

CR2E034 (3/95)

...ut the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further ...on 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 ... 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 ... Block 13 if changed, or on an attachment with an address.

Darlin Valdes 6-15-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0001470 CP