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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M01877

(3)

FILED Apr 28 1997 8:00am Secretary of State

Principal Place of Business Mailing Address OCEAN-TECHS SERVICES, INC. P. O. BOX 81 LAKE BUTLER FL 32054 OCEAN-TECHS SERVICES, INC. P. O. BOX 81 LAKE BUTLER FL 32054 DESCRIPTION OF THE PL 32054-0081					Date Incorporated or Qualified 3a. Date of Last Report	
					06/18/1984	05/01/1996
_ `	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		•	59-2426792 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Country 30			Yes 🗌 No
	g, Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent
JUN	EVER, JACK L. ICTION STATE ROAD 100 &121 E BUTLER FL 32043		82 Str 83		ss (P.O. Box Number is Not Acceptat	, , , , , , , , , , , , , , , , , , ,
			84 Cit	У		FL 85 Zip Code
SIGNATURE	to the provisions of Sections 607.050; registered agon, or both, in the State am familiar wife, and accept the obligation of the obligatio	rrano ilije ili applicablo (KO)	authorized by the onda Statutes. E. B. g stated Agent sign 13.		70	DATE
TITLE	PD	DELETE	1 1 117 LE			Change Addition
NAME Street address	KLUEVER, JACK L. JUNCT. ST. RD. 100 & 121 LAKE BUTLER FL		12 NAME 13 STREET ADDRE	ESS		·
CITY-ST-ZIP TITLE	DANE BUILDA FL	DELETE	1.4 CHY - ST - 7IP			
NAME Street address		C Milli	2.1 TUTLE 2.2 NAME 2.3 STREET ADDRI	FSS		Change Addition
CITY-ST-ZIP			2. 4 C(1y - S1 - ZIP			
NAME		[]; DETELE	3.1 TITLE 3.2 NAME			Change Addition
STREET ADDRESS			3.3 STREET ADDRE			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-7IP 4.1 TRLE			Change Addition
NAME		LJ bittle	4.2 NAME			Change Addition
STREET ADDRESS			4.3 STREET ADDRE	ess		
CITY-ST-ZIP			4.4 C(1)Y+S1 - Z(P)			
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRE	SS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME STREET ADDRESS			6.2 NAME			

14. I do 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 suppremental 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 13 if granged, or on an attachment with an address.