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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Feb 09 1998 8:00am Secretary of State

	1998		DIVISION OF CORPORATIONS		Secretary of State			
3	II Name	M76974	(8)					
OCEAN	I INC.							
Principal Plac	e of Business	M	ailing Address	·			il bioli cigil oldii cia	H
430 NORTH G STREET 430 NORTH G STREET								
LAKE WORTH FL 33460-2928 LAKE WORTH FL 33460-2928						DO NOT WRITE IN	THIS SPACE	
						3. Date Incorporated or Qualified		
Principal Place of Business 2a. Mailing Address						04/19/1988	·	
2. Principal Place of Business			2a. Mailing Address			4. FEI Number 65-0037482	- 1	oplied For ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			- ¢9.75	Additional	
22 27						5. Certificate of Status Desired	Fee R	equired
City & State			City & State		6. Election Campaign Financing		May Be	
23 Zip	Cou		Zìp	Country		Trust Fund Contribution 8. This corporation owes or has paid the		to Fees
24	25	29	· · -	30		Personal Property Tax due June 30.		□ No
		dress of Current Regis	tered Agent	0.5		10. Name and Address of New Registo	ered Agent	
1	NDERWOUDE, JAM	****		81 1	Name			
					Street Addres	ss (P.O. Box Number is Not Acceptable)		
LAKE WORTH FL 33460								
				84 (Dity		ler! Zin	Code
				111	•		-L	
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 region 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								ts registered registered
	m familiar with, and a	ccept the obligations of	, Section 607.0505, Flor	ida Statutes.			,,,-	
SIGNATURE	Signature, typed or printed n	ame of registered agent and title	if applicable. (NOTE,	Registered Agent s	signature required	when reinstating) D.	ATE	 }
12.		OFFICERS AND DIREC		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PS	* IANEO A	□ DELETE	1.1 TITLE			L Change	Addition (
NAME STREET ADDRESS	VANDERWOUDE, JAMES A. 6225 PINE DR.			1.2 NAME 1.3 STREET ADD	narce			
CITY-ST-ZIP	LANTANA FL			1.4 City-ST-ZiP				}
TITLE	VT		☐ DELETE	2.1 TITLE	"		Change	☐ Addition
NAME	SMYTH, WILLIAM P.			2.2 NAME				
STREET ADDRESS	1		2.3 STREET ADDRESS		DRESS			
CITY-ST-ZIP	LAKE WORTH FL		DELETE	2. 4 CITY-SY-ZIP DELETE 3.1 TITLE			Change	Addition
TITLE NAME			□ pereie	3.1 HILE			Change	AQUIRION
STREET ADDRESS				3.3 STREET ADD	DRESS			İ
CITY-ST-ZIP				3.4. CĪŢY-ST-Z				}
TITLE			DELETE	4.1 TITLE			Change	☐ Addition
NAME				4, 2 NAME				ĺ
STREET ADDRESS				4.3 STREET ADD				- (
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - ST - ZI 5.1 TITLE	IP		Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				5.3 STHEET ADD	DRESS			
CITY-SI-ZIP				5.4 CITY - ST - ZI	P		····	
TITLE			☐ DELETE	6.1 TITLE			Change	Addition
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREET ADD	1			ļ
14. I hereby c	ertify that the informa	tion supplied with this fi	ing does not qualify for	6.4 CITY-ST-ZI the exemption		ection 119.07(3)(i), Florida Statutes. I furth	er certify that the	Information

14. Thereby certify that the information supplied with this filling 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 recorder 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 changed, or on an artischment with an adverse.

SIGNATURE:

WELL REQUIRED

2/3/98

(561) 588-3854