FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

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 MAY -1 AM 9:14

DOCUMENT # N93000000843 (3)

1. Corporation Name
VOLUNTEER SEA-WATCHERS OF MIAMI, INC.

Principal Place of Business	Mailing Address
~~121 SE FIRST ST~~	~~121 SE FIRST ST~~
~~MIAMI FL 33131~~	~~MIAMI FL 33131~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/09/1993
3a. Date of Last Report: 08/04/1994
4. FEI Number: 65-0481185 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 25 S.E. 2 Ave	26 25 S.E. 2 Ave
Suite, Apt. #, etc. 22 201	Suite, Apt. #, etc. 27 201
City & State 23 Miami, Fl	City & State 28 Miami, Fl.
Zip 24 33131 Country 25 DADE	Zip 29 33131 Country 30 DADE

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

VEGA, JOSE M
25 SE 2ND AVE.
SUITE 201
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~VD~~	11 TITLE	D/P	☒ Change ☐ Addition
NAME	VEGA, JOSE M	12 NAME		
STREET ADDRESS	25 SE 2ND AVE. #201	13 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP		
TITLE	VD	21 TITLE	D/S	☒ Change ☐ Addition
NAME	SIBILA, JORGE	22 NAME		
STREET ADDRESS	2246 SW 1ST ST.	23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP		
TITLE	VD	31 TITLE	VP. /D	☒ Change ☐ Addition
NAME	BARADIT, AMERICO	32 NAME		
STREET ADDRESS	950 NW 11TH ST.3B	33 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33135	34 CITY-ST-ZIP		
TITLE	~~PD~~	41 TITLE		☒ Change ☐ Addition
NAME	~~CASTILLO, DEYCI M~~	42 NAME		
STREET ADDRESS	~~12955 SW 191 CT.~~	43 STREET ADDRESS		
CITY-ST-ZIP	~~MIAMI FL~~	44 CITY-ST-ZIP		
TITLE		51 TITLE	VP	☐ Change ☒ Addition
NAME		52 NAME	REGINA VILLECA	
STREET ADDRESS		53 STREET ADDRESS	25 SE. 2 AVE #201	
CITY-ST-ZIP		54 CITY-ST-ZIP	MIAMI, FL. 33131	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

ENTERED BY [illegible]

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)(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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added on an attachment with an address.

SIGNATURE: Jose M. Vega 4/24/95 (305) 535-5050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0041340