2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

with a list best with

FILED Apr 28, 2008 08:00 AM DOCUMENT # P00000024350 ** **Secretary of State** 1. Entity Name GALÁPAGOS DIVERS INC. Mailing Address Principal Place of Business P O BOX 312 6306 SW 23 ST HALLANDALE, FL 33008 MIRAMAR, FL 33023 CR2E034 (11/05) 04102008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0759372 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ESPINOZA, FERNANDO DO NOT WRITE 6306 SW 23 ST. MIRAMAR, FL 33023 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obtigations of registered agent. 4.20.08 SIGNATURE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000928915 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees V5/21/08-80048-006 150.nn 10. OFFICERS AND DIRECTORS TITLE NAME ESPINOZA, FERNANDO STREET ADDRESS 6306 SW 23 ST CITY-ST-ZIP MIRAMAR, FL 33023 TITLE NAME STREET ADDRESS CITY-ST-ZIP TÜLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-71P TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attact/ment with an address, with all other, like empowered.

Daytime Phone #