

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90029 021 ***150.00

DOCUMENT # P00000031151

1. Entity Name

DEEP BLUE SPORTSFISHING, INC.

Principal Place of Business

PO BOX 1453
CAPE CANAVERAL FL 32920-1453

Mailing Address

PO BOX 1453
CAPE CANAVERAL FL 32920-1453

2. Principal Place of Business

1376 Dutch Elm Dr.
Suite, Apt. #, etc.

3. Mailing Address

1376 Dutch Elm Dr.
Suite, Apt. #, etc.

City & State

Altamonte Springs, FL

City & State

Altamonte Springs, FL

Zip

32714

Country

Seminole

Zip

32714

Country

Seminole

4. FEI Number

91-3633520

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COCKRELL, DAN
800 SCALLOP DRIVE, SLIP 27A
PORT CANAVERAL FL 32920

7. Name and Address of New Registered Agent

Name

Cockrell, Dan

Street Address (P.O. Box Number is Not Acceptable)

1376 Dutch Elm Drive

City

Altamonte Springs FL

Zip Code

32714

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.

SIGNATURE

Dan Cockrell

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME COCKELL, DAN
STREET ADDRESS PO BOX 1453
CITY-ST-ZIP CAPE CANAVERAL FL 32920-1453

TITLE D ☐ Delete
NAME COCKELL, JOHN
STREET ADDRESS PO BOX 1453
CITY-ST-ZIP CAPE CANAVERAL FL 32920-1453

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME COCKRELL, DAN
STREET ADDRESS 1376 Dutch Elm Drive
CITY-ST-ZIP Altamonte Springs, FL 32714

TITLE D ☒ Change ☐ Addition
NAME COCKRELL, JOHN
STREET ADDRESS 1376 Dutch Elm Drive
CITY-ST-ZIP Altamonte Springs, FL 32714

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dan Cockrell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dan Cockrell

4/17/01

Date

407-492-5335

Daytime Phone #

CR2E034 (10/00)