


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90037 016 ***150.00

DOCUMENT # P00000073561	
1. Entity Name SEVERINO SCUBA, INC.	

Principal Place of Business 2905 69TH STREET EAST PALMETTO, FL 34221	Mailing Address 2905 69TH STREET EAST PALMETTO, FL 34221
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40070635



2. Principal Place of Business - No P.O. Box # 7511 E. Horse Hammock Rd Suite, Apt. #, etc.	3. Mailing Address 7511 E. Horse Hammock Rd Suite, Apt. #, etc.
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04142008 Chg-P CR2E034 (12/06)

City & State Avon Park	City & State Avon Park, FL
Zip 33825	Zip 33825
Country US	Country US

4. FEI Number 65-1047763	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SEVERINO, SUSAN 2905 69TH STREET EAST PALMETTO, FL 34221

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) change to Horse Hammock City FL
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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 obligations of registered agent.

SIGNATURE Susan Severino President Susan Severino 4/14/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-stating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
D SEVERINO, SUSAN 2905 69TH STREET EAST PALMETTO, FL 34221	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
D SEVERINO, JEFF 2905 69TH STREET EAST PALMETTO, FL 34221	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D Severino, Susan 7511 E. Horse Hammock Rd Avon Park, FL 33825	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D Severino, Jeff 7511 E. Horse Hammock Rd Avon Park, FL 33825	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 attachment with an address, with all other like empowered.

SIGNATURE: Susan Severino Susan Severino 4/14/08 863-314-5916
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE