

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080483

Entity Name: DIVE-TRAINING.COM, INC.

FILED
May 31, 2005
Secretary of State

Current Principal Place of Business:

745 32ND TERRACE
VERO BEACH, FL 32968

New Principal Place of Business:

1265 40TH AVENUE
VERO BEACH, FL 32960

Current Mailing Address:

745 32ND TERRACE
VERO BEACH, FL 32968

New Mailing Address:

5976 20TH STREET
#212
VERO BEACH, FL 32966

FEI Number: 52-2368187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAFE, AMY
745 32ND TERRACE
VERO BEACH, FL 32968 US

Name and Address of New Registered Agent:

NAFE, AMY
5976 20TH STREET
#212
VERO BEACH, FL 32966 US

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:

05/31/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NAFE, DAN
Address: 745 32ND TERRACE
City-St-Zip: VERO BEACH, FL 32968

Title: STD () Delete
Name: NAFE, AMY
Address: 745 32ND TERRACE
City-St-Zip: VERO BEACH, FL 32968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NAFE, DAN
Address: 1265 40TH AVENUE
City-St-Zip: VERO BEACH, FL 32960

Title: STD (X) Change () Addition
Name: NAFE, AMY
Address: 1265 40TH AVENUE
City-St-Zip: VERO BEACH, FL 32960

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMY D. NAFE

STD

05/31/2005

Electronic Signature of Signing Officer or Director

Date