2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000076889

DIVE PROFESSIONALS, INC.



FILED Jan 22, 2007 08:00 AM Secretary of State

Principal Place of Business

1 LOQUAT DRIVE KEY LARGO, FL 33037 Mailing Address

1 LOQUAT DRIVE KEY LARGO, FL 33037



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No Chg-P CR2E034 (11/05) 01172007

55-0867425

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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

SLATE, SPENCER C 1 LOQUAT DRIVE KEY LARGO, FL 33037

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	The above named entity submits this st the obligations of registered agent.	atement for the purpose of changing	its registered office or registered ager	nt, or both, in the State of Florida.	I am familiar with, and accep-
ŞI	GNATURE	<u> </u>		•	

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

U000000597747 01/24/07-80047-023 150.00

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE NAME SLATE, SPENCER C STREET ADDRESS 1 LOQUAT DRIVE KEY LARGO, FL 33037 CITY-ST-7IP BTLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

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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.