FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000012982 (4)**

1. Corporation Name

SEA WATCH MARINE, INC.

Principal Place of Business	Mailing Address
1900 GLADES RD SUITE 355 BOCA RATON FL 33431	1900 GLADES RD SUITE 355 BOCA RATON FL 33431

3. Date Incorporated or Qualified: **12/18/1992**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business
21 2300 Glades Road
22 Suite, Apt. #, etc. 302 E
23 City & State: Boca Raton, FL.
24 Zip: FL 25 Country: USA

2a. Mailing Address
26 2300 Glades Rd
27 Suite, Apt. #, etc. Suite 302 E
28 City & State: Boca Raton FL.
29 Zip: 33431 30 Country: USA

4. FEI Number: **65-0376353** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

SCIARETTA & SCHNER , P.A.
1900 GLADES ROAD, SUITE 355
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name: STEVEN A. SCIARRETTA
82 Street Address (P.O. Box Number is Not Acceptable): 2300 Glades Rd # 302 E
83
84 City: Boca Raton FL 85 Zip Code: 33431

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Steven A. Sciaretta (Signature, typed or printed name of individual signing. If agent is a corporation, the officer must sign.) (If agent is a corporation, the officer must sign.) Date: 4/26/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FINK, JAMES A JR	1.2 NAME	
STREET ADDRESS	1616 W. CAMDEN ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	HARTSVILLE SC 29550	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James A. Fink Jr. 4/30/96 803-383-4507
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
James A. Fink Jr.

CR2E034 (12/95)