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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Saridra B. Mortnam

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P93000021477 (3)

FLORIDA SEA LIFE, INC.



Principal Place of Business Mailing Address									
621 23RD STREET GULF MARATHON FL 33050			P O BOX 522813 N/A MARATHON SHORES FL 33062 US						
		00				3. Date Incorporated or Qualified 03/18/1993	3a. Date of La 05/0	st Report 1/1995	
2. Principal Plac	e of Business	2a. Mailing 26	2a. Mailing Address			4. FEI Number 65-0405568	FEI Number Applied For		
Suite, Apt. #, etc			Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State			City & State			6. Election Campaign Financing			
23	<u></u>	28		т		Trust Fund Contribution	<i></i>	Added to Fees	
Zip	Country	Zιρ		Country		8. This corporation has liability for intangible tax under s 199.032. Florida Statutes			
25 29 9. Name and Address of Current Registe		29		30		10. Name and Address of New I		t	
	9. Name and Address of Co	Helli Registered A	gent	8-	I Name				
FRANKL					ddress (P.O. Box Number is Not Acceptable)				
	VERSEAS HWY		82		2 Street Add	paress (P.O. Box Number is No. Acceptable)			
SUITE 4				6:	3				
MARATI	HON FL 33050			8	4 City		85	Zip Code	
				16.	City		FL °°	1,0000	
12.	igranire, typed or printed name of registers. I OFFICERS	AND DIRECTORS		13.		e. whe rend (ng) ADDITIONS/CHANGES TO OF			
12.	OFFICERS		DELETE	13. 1 1 liful	<u> </u>	ADDITIONS/CHANGES 10 OF	Ch		
NAME	Warren, Wohlers			1.2 NAM	1				
STREET ADDRESS	1877 107TH STREET G	ULF		1.3 STRE	ET ADDRESS				
CITY-ST-ZIF	MARATHON FL			1.4 CITY	- S1 - Z1F				
TITLE	PTS		DELETE	2 1 1111	F		☐ C1	ange	
NAME	FRANCK, DANIEL	_		2.2 NAM					
STREET ADDRESS	621 23RD STREET GUL MARATHON FL	.r			FI ADDRESS				
CITY-ST-ZIP	MARATHONICE] DELFTE	24 CITY 3 1 THL			□ Ch	iange 🔲 Addition	
TITLE		Ļ		3 2 NAM				ang. Casara	
NAME					EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				3 4 CITY					
11TLE			DELETE	4 1 TITL			Cr	nange 🔲 Addition	
NAME				4.2 NAM	E .				
STREET ADDRESS				4 3 S I R	ELT ADDRESS				
CITY - ST - ZIP				4.4.017.4	S*-71P				
TITLE			DELETE	5 1 Tifu	.E		Ct	nange 🔲 Addition	
NAME				5.2 NAM					
STREET ADDRESS				5.3 S1R6	EET ADORESS				
CITY-ST-ZIP			Tontal		ST ZIF		□ CI	nange Addition	
TITLE		[☐ DELETÉ	6 1 1111				range L Apunton	
NAME				6.2 NAV	1				
STREET ADDRESS					EET ADDRESS				
CITY-ST-ZIP				64 CITY	- S1 - ZiP				

14. To hereby certify that the information supplied with this fing 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 suppliemental 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 composition or the receiver or trusted 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 entary all administratives.

SIGNATURE

SIGNATURE AND TYPES OFFRINTED NAME OF SIGNING OFFICER OF DIRECTOR FRANK PRESIDENT 4-12-96 3-5) 743-6738