FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P93000021477 (3)

FLORIDA SEA LIFE, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business			Mailing Address				* 1001100 110 10100 1111 00111 00110 11011 11011 01011 (1001 1101 1101 1101 1101 1101 1101 1101 1101 1101 1101	
	TREET GULF	P O BOX 522813 N/A						
MARATHON FL 33050		Marat ron sh ores fl 33052 Us					DO NOT WRITE IN THIS SPACE	
ĺ		U	5				3. Date Incorporated or Qualified	
							03/18/1993	
2. Principal PI	ace of Business	20. 1	Mailing Address				4, FEI Number Applied For	
21		26	5-1204	5.7	/	WE	1, 40,000,00	
Suite, Apt.	# etc.		26 5 - 125 5T. G-ULF Suite, Apt. #, etc.			UZI	CP 7E Additional	
22		├ ──¬	27				5. Certificate of Status Desired Fee Regulred	
City & State			City & State					
23			28 MARATHON Zip Countr			F /	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution □ Added to Fees	
Zip	Country		<i>7/21/31/32 (7</i> /	Co	vintry	<u> </u>	Trust Fund Contribution ☐ Added to Fees	
24	25	29	33050	30		25A		
24	9. Name and Address of Curren		- +	[30]	`	734	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
		it riogiste			81	Name		
	RANKLIN D. GREENMAN, P.A.					1401110	[*]	
5800 OVERSEAS HWY					82 Street Address (P.O. Box Number is Not Acceptable)			
	JITE 40		<u> </u>			ļ		
M	ARATHON FL 33050				83		1	
					84	City	- 85 Zip Code	
						Ť	FL 1 1 1 1 1 1 1 1 1	
11. Pursuant to	o the provisions of Sections 607.050	2 and 607	'.1508, Florida Sta tu	ites, the a	above	e-named	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered	
agent. I ar	n fam iliar with, and accept the obliga	mons of S	Section 607.0505, F	lorida Sta	atutes	, 1116 COI). S.	rpolation's board of directors. Thereby accept the appointment as registered	
SIGNATURE								
	Signature, typed or printed name of registered age	nt and title if a	applicable (NC	II Register	ed Ago	ent signature	re required when reinstating) DATE	
12.	OFFICERS AND	DIBE CI	***************************************	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V PTS		DELETE	1.1	HTLE		PT3 Addition	
NAME	WARREN, WOHLERS			1.21	MAME		WOHLERS, WARREN	
STREET ADDRESS	1877 107TH STREET GULF			1.3	STREET	ADDRESS	5 1254 ST. GULF	
CITY-ST-ZIP	MARATHON FL			1.41	CITY-S	T-ZIP	MARATHON IFL. 33050	
TITLE	-PTS		DELETE	2.1	ITLE		Change Addition	
NAME	FRANCK, DANIEL			2.21	IAME]		
STREET ADDRESS	621 23RD STREET GULF			2.3 5	STREET	ADDRESS		
CITY-ST-ZIP	MARATHON FL			2.4	CITY - S	ST-ZIP		
TITLE			DELETE	3.1			Change Addition	
NAME					IAME	J		
STREET ADDRESS						address		
CITY-ST-ZIP					CITY-S			
TITLE			☐ DELETE	4.1		71.7411	Change Addition	
NAME					NAME			
STREET ADDRESS						ADDRESS		
l								
CITY-ST-ZIP TITLE			DELETE	5.1 T	HTLE	I · ZIP	☐ Change ☐ Addition	
			F-1 DECEME				El cianda El Wadigou	
NAME					IAME			
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP			T beleve		ITY-S	I-ZIP		
TITLE			☐ DELETE	6.1 T			Change Addition	
NAME				6.21	IAME			
STREET ADDRESS				6.3 5	TREET	ADDRESS		
CITY-ST-ZIP				6.4 (ITY-S	1 - 7IP		

hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.