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

Mailing Address 201 E PINE ST

SUITE 710

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Prace of Business

**SIGNATURE:** 

201 E PINE ST SUITE 710



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 10 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000027885 (1)

MARITIME EXPLORATIONS INTERNATIONAL, INC.

ORLANDO FL 3	32801		ORLANDO FL 32	ORLANDO FL 32801-2720				3. Date Incorno	orated or Qualified	3a. ∩a	te of Last F	Report	
								04/15/199	_	J	07/1996	·oport	
2. Principal P	Place of Business		2a. Mailing Addi	ress				4. FEI Number				oplied For	
21			26	26				59-3182	215		<del> </del>	ot Applicable	
Suite, Apt	#, etc		Suite, Apt. #, etc.			······································	1				Additional		
22		27	27				5. Certificate of	Status Desired			equired		
City & State	le		City & State					6. Election Carr	paign Financing		\$5.00	May Be	
23			28					Trust Fund Contribution					
Zip	Country Zip				Country	untry		8. This corpora	tion has liability for i	angible	tax under s	. 199.032,	
24 25 29 3								Florida Statutes					
	9. Name and	Address of Currer	nt Registered Agent					10. Name and A	ddress of New Fe	gistered /	Agent		
PICKERT, STEPHEN W						1	Name						
201 E PINE ST					92	82 Street Address (P.O. Box Number is Not Acceptable)							
					Street Address (F.O. B			as (F.O. BOX NUM	bei is Not Acceptat	110)			
SUITE 710 Orlando fl 32801					83								
ORL	TAMBO FL SEGO												
					84	(	City			FL	<b>85</b> Zip	Code	
11 Purcuant	to the provisions	of Sections 607 050	02 and 607.1508, Flori	ida Statutee th	no ahov	1	amed corno	vation submits this	statement for the r		changing i	ts registered	
office or r	registered agent, o	or both, in the State	of Florida, Such char	nge was autho	rized by	v ti	ne corporation	on's board of direc	tors. I hereby accep	of the app	ointment as	registered	
agent. I a	am fam liar with, ar	id accept the oblig	ations of, Section 607	'.0505, Florida	Statute	\$.	,		•	• •		•	
SIGNATURE.	•												
	Skinsdure, typed or pain	ited name of registered age		the state of the same of the s		jent	signature require	d when reinstating)	LIANIOSO TO OFFIC	DATE	DIDECTO	50 11 10	
12.	T =	OFFICERS AN	D DIRECTORS		13.			ADDITIONS/C	HANGES TO OFFIC	ERS AND	_		
TITLE	D		L <b>J</b> U		1.1 TITLE						☐ Change	Addition	
NAME	HORNER, L D			1	1.2 NAME								
STREET ADDRESS	, <b></b>			J	1.3 STREET	T AO	IDRESS						
CITY - S1 - ZIP	ORLANDO FL	32801			1.4 CITY - S	ST-	ZIP				·	·	
TITLE	D		□ t	ELETE	2.1 TITLE						Change	Addition	
NAME	O'CONNOR,	E A JR			2.2 NAME								
STREET ADDRESS	201 E PINE S	T SUITE 710			2.3 STREET	T AD	ODRESS						
CrTY - ST - ZIP	ORLANDO FL	32801			2. 4 CITY-	ST-	ZIP		j /				
TITLE	D		0	ELETE	3.1 TITLE				,		Change	Addition	
NAME	ULLIAN, L J			ſ	3.2 NAME					,			
STREET ADDRESS	201 E PINE S	T SUITE 710		1	3.3 STREET	T AC	DORESS						
CITY - ST - 719	ORLANDO FL				3.4. CITY-								
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NAME					4. 2 NAME	:	-				- •	_	
STREET ADDRESS					4.3 STREE1		nnpecc						
					4.4 CiTY - 9								
CITY-S1-ZIP TITLE	ļ				51 TITLE		ZIP				Change	Addition	
	1		LJ 2				Ì				المران البيا	Land Floorition	
NAMÉ					5.2 NAME								
STREET ADDRESS					5.3 STREET		l l						
CiTY - ST - ZIP					5.4 CITY - S	ST-	ZIP				- Ab		
TITLE			L.,1 U		6.1 TITLE						Change	Addition	
NAME					6.2 NAME								
STREET ADDRESS					6.3 STREE	T AL	DDRESS						
C(1Y - S1 - ZIP	<u> </u>				6.4 CITY-			·····	·····				
14. I do herel	eby certify that the	information supplie	ed with this filing does supplemental annual i	not qualify for	the exe	em wre	ption stated	in Section 119.07(	3)(i), Florida Statute	s. I further	r certify that	the	
I am an o	officer or director o	of the corporation o	r the receiver or truste or on an attachment w	ee empowered	l to exec	cut	e this report	as required by Ch	apter 607, Florida S	itatutes; a	nd that my	name	