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Mar 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000029049 (2)

1. Corporation Name
RESORT SCUBA INCORPORATED

Principal Place of Business
3119 31ST WAY
W. PALM BEACH FL 33407

Mailing Address
3119 31ST WAY
W. PALM BEACH FL 33407-6711



3. Date Incorporated or Qualified 04/20/1993
3a. Date of Last Report 05/01/1996

2. Principal Place of Business
21 461 NE 42ND STREET
Suite, Apt. #, etc.

2a. Mailing Address
26 461 NE 42ND STREET
Suite, Apt. #, etc.

4. FEI Number 65-0404740
Applied For Not Applicable

22 City & State
23 BOCA RATON, FL

27 City & State
28 BOCA RATON, FL

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

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

24 Zip 33431 25 Country USA

29 Zip 33431 30 Country USA

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EVERITT, STEPHEN J
10314 ALLEGRO DR.
BOCA RATON FL 33428

81 Name EVERITT, STEPHEN J.

82 Street Address (P.O. Box Number is Not Acceptable)
461 NE 42ND STREET

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

Signature of principal or proposed name of registered agent and title if applicable

STEPHEN EVERITT PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

DATE 3/8/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME EVERITT, STEPHEN J
STREET ADDRESS 10314 ALLEGRO DR.
CITY-ST-ZIP BOCA RATON FL

1.1 TITLE
1.2 NAME EVERITT, STEPHEN J
1.3 STREET ADDRESS 461 NE 42ND STREET
1.4 CITY-ST-ZIP BOCA RATON FL 33431

TITLE T
NAME EVERITT, HELEN
STREET ADDRESS 10314 ALLEGRO AVE.
CITY-ST-ZIP BOCA RATON FL

2.1 TITLE
2.2 NAME ~~EVERITT, HELEN~~
2.3 STREET ADDRESS 461 NE 42ND STREET
2.4 CITY-ST-ZIP BOCA RATON, FL 33431

TITLE V.P.
NAME MICHAEL TUCKER
STREET ADDRESS 3440 N PINEWALK
CITY-ST-ZIP POMPANO BEACH, FL 33063

3.1 TITLE V.P.
3.2 NAME MICHAEL TUCKER
3.3 STREET ADDRESS 3440 N PINEWALK DRIVE # 518
3.4 CITY-ST-ZIP POMPANO BEACH, FL 33063

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 registered 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN EVERITT

DATE 3/8/97 5614771854

CR2E034 (9/96)