

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

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Jun 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *P93000042243*

1. Corporation Name

Sub Conscious Yachting, Inc.

Principal Place of Business

3000 NE 30th Place
Ft. Lauderdale, FL 33306

Mailing Address

325 Bic Drive
Milford, CT 06460

3. Date Incorporated or Qualified

6/15/93

3a. Date of Last Report

1996

2. Principal Place of Business

21 3000 NE 30th Place

22 Suite, Apt. #, etc.
Suite 207

23 City & State
Ft. Lauderdale, FL

24 Zip Country
33306 USA

2a. Mailing Address

26 325 Bic Drive

27 Suite, Apt. #, etc.

28 City & State
Milford, CT 06460

29 Zip Country
06460 USA

4. FEI Number

65-0417385

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 intang'ble tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

Corporation Service Corporation
1201 Hays Street
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE *P/T/D*
NAME Wayne Levin
STREET ADDRESS 321 W. Hillsborough Blvd.
CITY-ST-ZIP Deerfield Beach, FL 33441
☒ DELETE

TITLE *V/S/D*
NAME Helen Edo
STREET ADDRESS 321 W. Hillsboro Blvd.
CITY-ST-ZIP Deerfield Beach, FL 33441
☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE *P/T/D*
12 NAME Alfred Florio
13 STREET ADDRESS 3000 NE 30th Place
14 CITY-ST-ZIP Ft. Lauderdale, FL 33306
☒ Change ☐ Addition

21 TITLE *V/S/D*
22 NAME Carolyn Schulz
23 STREET ADDRESS 3000 NE 30th Place
24 CITY-ST-ZIP Ft. Lauderdale, FL 33306
☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP
☐ Change ☐ Addition

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 supplement to 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 amendment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-2-97

Date

954-630-0880

Daytime Phone #

CR2E034 (9/96)