## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT-OF STATE CORPORATION ·Sandra B. Mortham ANNUAL REPORT Secretary of State **`1996** DIVISION OF CORPORATIONS P93000048966 (4) **DOCUMENT #** Corporation Name SOUTH FLORIDA SEA VENTURES, INC. Principal Place of Business Marling Address 1104 N COLLIER BLVD. 1104 N COLLIER BLVD. MARCO ISLAND FL 33937 MARCO ISLAND FL 33937 3. Date Incorporated or Qualified 3a. Date of Last Report 07/13/1993 12/04/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0438588 Not Applicable Suite, Ant. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zιρ Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Flooda Statutes ☐ Yes **X**No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREUSEL, JAMIE B Street Address (P.O. Box Number is Not Acceptable) 82 1104 N COLLIER BLVD. 4 MARCO ISLAND FL 33937 83 84 City 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 Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am accept the obligations of Section 607.0505. Florida Statutes. SIGNATURE 1 detect Aprild some neigh 12 OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PST DILE DELETE L 1 Title 6 ☐ Change Addition MINOGUE, SEAN NAME 1.2 NAME 2 MARCO LAKE DRIVE STREET ADDRESS 13 STREET ADDRESS MARCO ISLAND FL 33937 CITY - ST - ZIP 14 City St ZiP TILLE DELETE 2 1 liftue Change Addition NAMÉ 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 24 CHY-ST ZIP TITLE DELETE 3 1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 City - St. 7/F TITLE DELETE 4 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY-ST-ZIP 4.4 CITY - \$1 - ZiP TITLE DELETE 5 1 7 ITLE Change Addition NAME 900001816009 -05/10/96--01012--003 5.2 NAME . STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP \*\*\*200.00 5.4 C(1Y - S1 - Z)P Addition TITLE DELETE 6 1711; 8 Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS. CITY-ST-ZIP 6.4 C/TY - ST - Z P 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x). Florida Statutes. I further certify that the information indicated on this annial manual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if dvaliged, or disal attachment with an autress.

Mirroque, Pres 4/19/96

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER