

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000088442

1. Entity Name

BISCAYNE NATIONAL UNDERWATER PARK, INC.

FILED
Sep 07, 2000 8:00 am
Secretary of State

09-07-2000 90040 019 ***550.00

Principal Place of Business

6023 HOLLYWOOD BLVD
 1720 HARRISON STREET, SUITE 6A
 HOLLYWOOD FL 33024
 US

-Mailing Address

6023 HOLLYWOOD BLVD
 HOLLYWOOD FL 33024
 US

00103404



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PEMBROKE PINES FL

City & State

PEMBROKE PINES FL

4. FEI Number

65-0457333

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

INMAN, DAVID
 6023 HOLLYWOOD BLVD
 HOLLYWOOD FL 33024

7. Name and Address of New Registered Agent

Name: INMAN, DAVID
 Street Address (P.O. Box Number is Not acceptable): 10191 PINES BLVD.
 City: PEMBROKE PINES FL Zip Code: 33026

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: P
 NAME: INMAN, DAVID
 STREET ADDRESS: 6023 HOLLYWOOD BLVD
 CITY-ST-ZIP: HOLLYWOOD FL

TITLE: S
 NAME: HORNBERGER, WALTER
 STREET ADDRESS: P O BOX 1426 NA
 CITY-ST-ZIP: STUART FL

TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

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TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: P
 NAME: INMAN, DAVID
 STREET ADDRESS: 10191 PINES BLVD
 CITY-ST-ZIP: PEMBROKE PINES FL 33024

TITLE: S
 NAME: HORNBERGER, WALTER
 STREET ADDRESS: 32801 HWY 441 No. #179
 CITY-ST-ZIP: OKEECHOBEE FL 34972

TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

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TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

W. J. HORNBERGER (SEC.) 9/3/00 561-331-3337

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)