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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400000384 (5)

OCEANIC LIASON, INC.

FILED Jun 05 1997 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			# 10001000 316 (dill graft golff golff agitt bout dotts maled titer rests give seal.			
1601 SE 16TH FT LAUDERDAI US	STREET LE FL 33316	790 E BROWARD BLVD 4	C/O ACCTG BUSINESS CONSLTS 780 E BROWARD BLVD #302 FT LAUDERDALE FL 33301-2077 US						
						3. Date Incorporated or Qualified 01/04/1994			
	lac e o f Business	2a. Mailing Address				4. FEI Number			oplied For
21		26				65-0461964			of Applicable
Sune, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	
22		27 City & State							···-
City & State	e	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	
23 Zip	Country	28 Zip	Cour	ntrv		8. This corporation has liability for			
24	25	29	30	,		Florida Statutes	Yes	No	. 105.032.,
[24]	9. Name and Address of Curre		190]			10. Name and Address of New Re			
WAI	LLACE, DEE			81 Na	ame				
	1 SE 16TH STREET				A d d	CO C Park Number in Nat Assessed			
	. 302			82 St	reet Addres	ess (P.O. Box Number is Not Acceptate	леј		
	LAUDERDALE FL \$3316	· ·	Ī	83					
		. /	}	84 Ci	itu			es Zin i	Code
ĺ	1 1 1 1	.//	ŀ		•		FL	85 Zip (i
11. Pursuant	to the provisions of Sections	and 607.1508, Florida Statu	tes, the ab	ove-na	med corpo	oration submits this statement for the p	ourpose of o	hanging it	ls registered
office or r	registered agent) or/both/ip/t/c S/a/ im familiar with, and acoustine obta	7/01 Florida. Such change was vations of Section 607.0505, F	authorizec Iorida Stati	i by the Jies.	corporatio	oration submits this statement for the pon's board of directors. I hereby acce	or me appo	nunent as	registered
SIGNATURE		W.X						1	
SIGNATURE	Signature, typed of standard name of registered at	gent and title it applicable (NO	TE Fiegistered	Agent sig	nature required	d when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		_	
TITLE	OP .	DELETE	1.1 Tif	LĒ			L	Change	Addition
NAMÉ	WALLACE, DEE		1.2 NAME						
STREET ADDRESS	1601 SE 16TH STREET	/	1.3 STREET ADDRESS		RESS				
CITY-ST-ZIP	FT LAUDERDALE FL			Y-ST-ZIP		,_,-,			The same
TITLE	8	₩ DELETE	2.1 111		10	100	u ـ	Change	Addition
NAME	MARTENS, NANCY	4	2.2 NAME		N	TANCY MARIEN	3 - T T -		
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CITY-ST-ZIP	CORPUS CHRISTI TX		2. 4 CITY - ST- ZIP		P F-1	LANCY MARTEN. OI SEID HI STR. LAUDERDALE, F	<u>دی </u>	3/6	/
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NAME			3.2 NA						
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NAME			5.2 NA						
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CITY-ST-ZIP		□ 65,555		Y-S1-7#	,			Change	Addition
TITLE		DELETE	6.1 TIT				Į.	Change	☐ Addition
NAME	1		6.2 NA	ME					
STREET ADDRESS			6.3 \$1	reet addi	RESS				
CITY-ST-ZIP	<u> </u>	D 11		1Y - ST - ZIF		in Section 119.07/3\/i) Florida Statute	n 1 fr - 1 h e -	oorlife sheet	Ltho

I do hereby certify that the information supplied with this fill of 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 of supplied and in the same legal effect as if made under oath; that I am an officer or director of the coloration of the coloration of the coloration of the coloration of the same legal effect as if made under oath; that I am an officer or director of the coloration of the coloration of the coloration of the coloration of the same legal effect as if made under oath; that I am an officer or director of the coloration of the colorati

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