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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000004389 (0)

 Corporation Name POSEIDON V INVESTMENTS, INC.

Country

9. Name and Address of Current Registered Agent

25

CAPITAL CONNECTION, INC.

417 E. VIRGINIA STREET

TALLAHASSEE FL 32301

Principal Place of Business 1816 SENECA BLVD. WINTER SPRINGS FL 32708

2. Principal Place of Business

Suite, Apt. #, etc.

SUITE 1

City & State

21

22

23

24

Zip

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

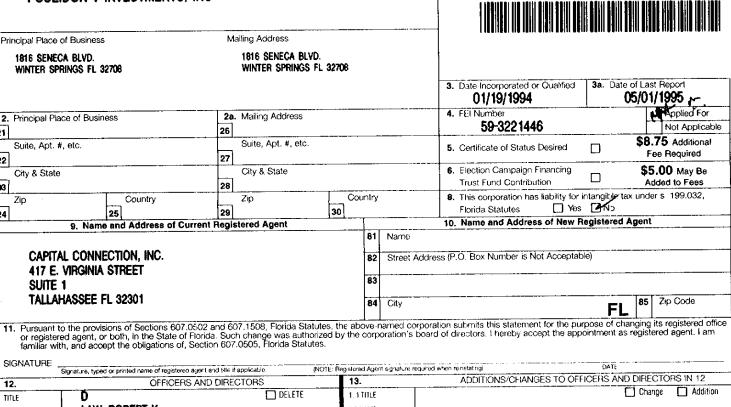
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1816 SENECA BLVD. WINTER SPRINGS FL 32708



SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registereo agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1. 1 TITLE TITLE LAW, ROBERT K 1.2 NAME NAME 1816 SENECA BLVD. 13 STREET ADDRESS STREET ADDRESS WINTER SPRINGS FL 32708 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 2.1 TITLE TITLE 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3. 1 TITLE TITLE 3.2 NAME 800001752988 -03/21/96--01078--007 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP ***2<u>00,00</u>-Change Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CiTY-ST-ZiP CITY - ST - ZIP ☐ Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

Country

81 Name

82

83

84

City

30

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)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and triat my signature shall have the same legal effect as if made under certify 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 or an attachment with an address.

CR2E034 (12/95)