

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PH 5:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000005326 (1)

1. Corporation Name

**AQUA SPORTS UNLIMITED OF BRADENTON BEACH, INC.
SEA TREK DIVERS, INC.**

Principal Place of Business

105 7TH STREET, NORTH
BRADENTON BEACH FL 34217

Mailing Address

105 7TH STREET, NORTH
BRADENTON BEACH FL 34217

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/13/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

4. FEI Number

65-0459217

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 intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**DORR, LEILA
5108 BIMINI DR.
BRADENTON FL 34210**

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 607.0503, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and the # of associates)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**P/T
Leila Dorr
5108 Bimini Dr.
Bradenton, FL 34210**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
**V/S
Thomas Dorr
5108 Bimini Dr.
Bradenton, FL 34210**

TITLE
NAME

STREET ADDRESS
CITY ST ZIP

TITLE
NAME

STREET ADDRESS
CITY ST ZIP

TITLE
NAME

STREET ADDRESS
CITY ST ZIP

TITLE
NAME

STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY ST ZIP
**100001473241
-05/04/95--01021--013
****200.00 ****200.00**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY ST ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

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 110.07(3)(k), Florida Statutes. I further
certify that the information indicated on this annual report or supplemental annual report is true and accurate and 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 attachment with an address

SIGNATURE:

Leila Dorr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Leila Dorr

4-13-95

(813)779-1506