SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jul 25 1997 8:00am Secretary of State

	MENT # P9400(MPHIBIOUS GEAR, INC.	0044051 (8	3)					
Principal Place	e of Business	Mailing Address				DIN BONK AND		
2315 STIRLING FT LAUDERDA	3 RD	2315 STIRLING RD FT LAUDERDALE FL 33312			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report			
					06/13/1994	04/	29/199	16
2. Principal P	lace of Business	26. Mailing Address 26			4. FEI Number 65-0555535			Applied For Not Applicat
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State	8	City & State			Election Campaign Financing Trust Fund Contribution			00 May Be od to Fees
Zip 4	Country 25	7 ip	30	Country	8. This corporation owes or has p Personal Property Tax due Jun	e 30. 🛚 🗀] Yes	Intangible No
	9. Name and Address of Currer	nt Registered Agent		81 Name	10. Name and Address of New R	egistered A	gent	
11. Pursuant office or r agent. I a SIGNATURE	m familiar with, and accept the oblig	pations of, Section 607.0509	5, Florida	a Statutes.	orporation submits this statement for the rration's board of directors. I hereby acco			ip Code g its registere as registered
40	Signature typed or printed name of registrated ag	ont and title if applicable ID DIRECTORS	(NOTE RE	gistered Agent signature re	equired when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIDECT	ODC IN 10
12.	OFFICERS AN	DELETE		13. 1.1 TITLE	ADDITIONS/CHANGES TO OFF	ICENS AND	☐ Chang	
NAME STREET ADDRESS CITY-ST-ZIP	CHESS, AMOS 2315 STIRLING RD FT LAUDERDALE FL 33312			1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP				
TITLE NAME		DELETE		21 TITLE 22 NAME		,	☐ Chang	ge 🔲 Addit
STREET ADDRESS City-St-Zip				2 3 STREET ADDRESS 2.4 City-St-Zip	<u></u>			
TITLE NAME STREET ADDRESS		☐ DELETE		31 TITLE 32 NAME 33 STREET ADDRESS			∐ Chang	ge 🔲 Addil
CITY-ST-ZIP TITLE NAME		☐ DELETE	,	3.4 C/TY-ST-ZIP 4.1 TITLE 4. 2 NAME			Chang	ge 🔲 Addit
STREET ADDRESS				4.3 STREET ADDRESS				

14. I do 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 annual report or supplemental innual 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 charged, or on an address.

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

SIGNATURE:

NAME

TITLE

NAME

STREET ADORESS

STREET ADORESS

CITY-ST-ZIP

Sil Will an address

DELETE

DELETE

7/18/97 (954)966-1304

Change

Change

Addition

Addition