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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # P94000049318 (6)

BELIZE DIVE TOURS, INC.					
Principal Place of Business  1729 E COMMERCIAL BLVD SUITE 235 FORT LAUDERDALE FL 33334		Mailing Address  1729 E COMMERCIAL BLVD SUITE 235 FORT LAUDERDALE FL 33334			
				3. Date Incorporated or Qualified 07/01/1994	3a. Date of Last Report 08/10/1995
Ł. Principal Pia ∐	ice of Business	2a. Mailing Address		4. FEI Number 65-0504844	Applied For Not Applicable
Suite, Apt. #	t, etc	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & State		Crty & State		6. Election Campaign Financing	Fee Required  \$5.00 May Be
H	····	28		Trust Fund Contribution	Added to Fees
- Zip i∏	Country 25	Ζιρ <b>29</b>	Country 30	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, :
1	9. Name and Address of Cu		100	10. Name and Address of New F	
			81 Name		
CORPORATION INFORMATION SERVIC 1201 HAYS ST. TALLAHASSEE FL 32301		MCES INC.	82 Street Add	ddress (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
II. Parsuant to	o the provisions of Sections 607.	0502 and 607.1508. Florida Sta	atutes, the above named corpo	oration submits this statement for the nu	roose of changing its registered office
or registere	ed agent, or both, in the State of	Florida, Such change was auth	porized by the corporation's have	protection accounts this action on the par	post of charging its registered office
familiar with	<ul> <li>h, and accept the obligations of.</li> </ul>	Section 607.0505, Florida State	utes.	ard of directors. I hereby accept the app	omment as registered agent. I am
SIGNATURE			utes.	oration submits this statement for the pur ard of directors. I hereby accept the app	oiniment as registered agent. I am
SIGNATURE	Styristons, typical or pointed marrie of registered	flagent and total applicable	(NOTe: Registered Agent signature requir	red when reinstating)	DATE
GNATUR!	Styristons, typical or pointed marrie of registered				DATE
SIGNATURE ILE	Styre time, typical or pouled name of registered OFFICE RS	s agent are to diapplication S AND DIRECTORS DELETE	(NOTe: Registured Agent signature requirements)	red when reinstating)	DATE ICERS AND DIRECTORS IN 12
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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; appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Date Daytime Pno

avtime Phone #