

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 # P94000051000 (5)

1. Corporation Name

GARY HUGHES DIVE CHARTERS, INC.



Principal Place of Business

P.O. BOX 54-6070
MIAMI FL 33154
US

Mailing Address

P.O. BOX 54-6070
MIAMI FL 33154

2. Principal Place of Business

21 P.O. Box 54-5870

Suite, Apt. #, etc.

22 City & State

23 MIAMI, FL 33154

Zip

Country

24

2a. Mailing Address

26 54-5870

Suite, Apt. #, etc.

27 City & State

28 MIAMI FL

Zip

Country

29

30

3. Date Incorporated or Qualified
07/06/1994

3a. Date of Last Report
08/21/1995

4. FEI Number
65-0507659

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

10. Name and Address of New Registered Agent

COHEN, MYER J
2601 E. OAKLAND PARK BLVD.
SUITE 203
FORT LAUDERDALE FL 33306

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed from a registered agent or officer of the corporation

Signature of person Agent signature required with this filing

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME HUGHES, GARY
STREET ADDRESS 9540 W. BAY HARBOR DRIVE
CITY-ST-ZIP BAY HARBOR ISLANDS FL 33154

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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 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 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:

GARY N. HUGHES, President
GARY N. HUGHES

8-9-96

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