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 # **P94000055876 (4)**

1. Corporation Name

SUB-AQUATIC SAFETY SERVICES OF FLORIDA, INC.

Principal Place of Business	Mailing Address
% HYPERBARICS 50 HIGH POINT ROAD TAVERNIER FL 33070	% HYPERBARICS 50 HIGH POINT ROAD TAVERNIER FL 33070

3. Date Incorporated or Qualified: **07/28/1994**
3a. Date of Last Report: **03/08/1995**
4. FEI Number: **58-2137169** ☐ 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

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

RYAN, RONALD
% HYPERBARICS
50 HIGH POINT ROAD
TAVERNIER FL 33070

10. Name and Address of New Registered Agent

81 Name: Steve Tellyer
82 Street Address (P.O. Box Number is Not Acceptable): c/o Hyperbarics
83 50 High Point Rd
84 City: TAVERNIER FL **FL** 85 Zip Code: 33070

11. Pursuant to the provisions of Sections 607.0505 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 607.0505, Florida Statutes.

SIGNATURE: Steven B. Tellyer- Agent — 05/06/96
Signature of New Registered Agent — Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '96	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	MORENO, MAURICIO	1.2 NAME	
STREET ADDRESS	4514 COLE AVENUE, 6TH FLOOR	1.3 STREET ADDRESS	
CITY-ST-ZIP	DALLAS TX 75205	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	800001833118
STREET ADDRESS		5.3 STREET ADDRESS	-05/21/96--01145--036
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***200.00
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

5.1

14. I do hereby certify that the information supplied with this filing is valid and 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 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.

(214) 559-7714

SIGNATURE: Mauricio Moreno- Director — 04/17/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)