SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

*PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 15, 1999 8:00 am Secretary of State

07-15-1999 90001 030 ***150.00

| DOCUMENT : | [#] P94000090648 |
|------------------|---------------------------|
| Corporation Name | ~ F34000030040 |

SUNNY SEAS SCUBA, INC.

| Principal Place | of Business | Mailing Address | | | | - |
|--|---|---------------------------------|---------------|-----------------|----------------------|---|
| 7115 US 19 S | | 7115 US 19 S | | | | |
| NEW PORT RIC | CHEY FL 34652 | NEW PORT RICHEY FL 3 | 4652 | | | DO MOST MUSICIS IN THE ORDER |
| US | | US | | | | DO NOT WRITE IN THIS SPACE |
| | | | | | | 3. Date incorporated or Qualified |
| | | A. Barilla Balanca | | | | 12/15/1994 4. FEI Number Applied For |
| 2. Principal Place of Business 2a. Mailing Address | | | | | | |
| 21 | # _1_ | 26 Suite Ant # ata | | | | 59-3292599 Not Applicable \$8.75 Additional |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | ├ ── ' | | | | 5. Certificate of Status Desired Fee Required |
| 22 - 27 - City & State | | City & State | | | | 6, Election Campaign Financing\$5.00 May Be |
| | | 28 | | | | Trust Fund Contribution Added to Fees |
| 23 Zip | Country | Zip | Cou | ntry | | 8. This corporation owes the current year |
| 24 | 25 | 29 | 30 | - | | Intangible Personal Property. Yes No |
| | 9. Name and Address of Currer | . 1 1 | 1 | | | 10. Name and Address of New Registered Agent |
| | | | | 81 | Name | |
| | BELLONIA, WAYNE D | | 1 | 82 | Stroot Addro | ss (P.O. Box Number is Not Acceptable) |
| | 0 U.S. 19 | | i | 62 | Stieet Addre | ass (F.O. Box Holliber is Not Acceptable) |
| PT. | RICHEY FL 34668 | | l | 83 | | |
| | | | Į | 0.4 | 0.1 | 85 Zip Code |
| | | | | 84 | City | FL S Zip Code |
| 11. Pursuant | to the provisions of sections 607.050 |)2 and 607,1508, Florida Statut | es, the abo | ove-n | amed corpora | ation submits this statement for the purpose of changing its registered |
| office or a | registered agent, or both, in the State am familiar with, and accept the oblig | e of Florida. Such change was | authorized | ว อง เ | he corporation | n's board of directors. I hereby accept the appointment as registered |
| _ | am familiar with, and accept the oolig | Jacons of, section 607.0305, Fi | Unite State | uies. | | |
| SIGNĂTURE . | Signature, typed or printed name of registered age | ant and title if applicable. (N | IOTE: Registe | red Age | ent signature requir | red when reinstating) DATE |
| 12. | | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | PTS | DELETE | 1.1 111 | ΓE | | Change Addition |
| NAME | DEBELLONIA, WAYNE D | 1.2 NA | | ME | 1 | |
| STREET ADDRESS | 9126 PROSPERITY LN | | 1.3 STR | | DDRESS | |
| CITY-ST-ZIP | DOOT BIGUEV EI | | 1.4 CIT | 1.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 2.1 TIT | rl e | | Change Addition |
| NAME | | | 2.2 NA | WE | 1 | |
| STREET ADDRESS | | | 2.3 ST | REETA | DORESS | |
| CITY-ST-ZIP | | - | 2.4 CF | TY-ST-2 | ZIP | |
| TITLE | | DELETE | 3.1 TIT | TLE | | Change Addition |
| NAME | | _ | 3.2 NA | ME | | |
| STREET ADDRESS | | | 3.3 ST | REETA | UDDRESS | |
| CITY-ST-ZIP | | | 3.4 CI | TY-ST-Z | ZIP | |
| TITLE | | DELETE | 4.1 TIT | ΓLE | | Change Addition |
| NAME | | | 4.2 NA | WE. | | |
| STREET ADDRESS | | | 4.3 ST | REET A | NDDRESS | |
| CITY-ST-ZIP | | | 4.4 Cl⁻ | TY-ST-Z | ZIP | |
| TITLE | | DELETE | 5.1 Ti | TLE | · - T | Change Addition |
| NAME | | | 5.2 NA | ME | | |
| STREET ADDRESS | | | 5.3 ST | REETA | ADDRESS | |
| CITY-ST-ZIP | | | 5.4 CI | TY-ST-Z | ZIP | |
| TITLE | | DELETE | 6.1 TIT | TLE | | Change Addition |
| NAME | | | 6.2 NA | \ME | | |
| STREET ADDRESS | | | 6.3 ST | REETA | ADDRESS | |
| CITY-ST-ZIP | | | 6.4 CI | TY-ST-2 | ZIP | |

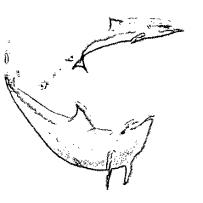
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall 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 of the production of the corporation of the corp

SIGNATURE:

WAYNE D. DE BELLONIA

7/02/99

727-849-2478





Sunny Seas Scuba Wavne DeBallant

We Be Divin!

7115 U.S. 19 S. * New Port Richey, FL 34652 Phone: (727) 849-2478 (727) 845-5795 * Fax: (727) 849-3603

JULY 2,1999

Wade DeBellonia, General Manager



DIVISION OF CORPORATIONS P O BOX 6327 TALLAHASSEE FLORIDA

MATTER.

TO WHOM IT MAY CONCERN;

I HAVE JUST RECIEVED A SECOND NOTICE ON PAYMENT OF THE 1999 ANNUAL REPORT FOR MY CORPORATION. THIS I HAVE ALREADY FILED IN THE MIDDLE OF MARCH WHICH I PAY EARLY EVERY YEAR SINCE WE HAVE INCORPORATED. I NEVER THOUGHT TO SEND MY x REPORT REGISTERED IN THE EVENT IT MAY NOT ARRIVE OR GET LOST I CALLED YOUR OFFICE LAST WEEK AND THE GENTLEMAN RECOMMENDED THAT I SEND THE NOTICE INTO YOU WITH ANOTHER PAY-MENT AND EXPLAIN MY SITUATION. PLEASE EXCEPT THE PAYMENT AND NEXT YEAR I WILL SEND MY ANNUAL REPORT REGISTERED SO I WILL KNOW THAT IT HAS ARRIVED AND I WILL NOT BE IN THIS

TYPE OF SITUATION AGAIN. THANK YOU FOR YOUR TIME IN

WAYNE D. DE BELLONIA PRESIDENT

