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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000093198 (7)

DIVE VERSIONS, INC.

STREET ADDRESS

SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attachment with an address

City - S1 - ZiP

Principal Place of Business Mailing Address 8214 GLADES RD 8214 GLADES RD **BOCA RATON FL 33434 BOCA RATON FL 33434-4065** 3. Date Incorporated or Qualified 3a. Date of Last Report 12/23/1994 09/26/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 21 06-0543106 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Added to Fees Trust Fund Contribution Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Yes No Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **ELLIOTT, EDWARD J** 5401 NE 33 AVE 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33308 83 City 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. I hereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signal ire, typed or printed name of registered agent and title if applicable (NO1E: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) THILE D DELETE 1.1 TITLE Change Addition NAME ELLIOTT, EDWARD J 12 NAME 5401 NE 33 AVE STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33308 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE TITLE 21 TITLE Change Addition ELLIOTT, MARICELE M NAME 22 NAME 5401 NE 33 AVE STREET ADDRESS 23 STREET ADDRESS FT LAUDERDALE FL 33308 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-ZP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ☐ Addition NAMÉ 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-7IP 5.4 CITY-ST-ZIP DELETE THE 6.1 TITLE Change ☐ Addition NAM: 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. Ido 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

CLOT BOWARD T. BLUDTT