## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # P95000033090 Mar 29, 2000 8:00 am 1. Entity Name **Secretary of State** K & R DIVING, INC. 03-29-2000 90003 040 \*\*\*150.00 Principal Place of Business Mailing Address 11833 OVERSEAS HIGHWAY 11833 OVERSEAS HIGHWAY MARATHON FL 33050-3040 MARATHON EL 33050 2. Principal Place of Business 3. Mailing Address GULF 712 GOTH ST DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0574709 Not Applicable NARATHON \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RICHARD G. FORTMANN Street Address (P.O. Box Number is Not Acceptable) MILLER, ROBERT K 2975 OVERSEAS HIGHWAY MARATHON FL 33050 MARRATHON 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida ZKHARD G. FORTMANL SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Delete TITLE TITLE FORTMANN, RICHARD G. NAME NAME STREET ADDRESS 11833 OVERSEAS HWY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MARATHON FL ☐ Addition Change VTSD ☐ Detete TITLE FORTMANN, KATHLEEN NAME STREET ADDRESS STREET ADDRESS 11833 OVERSEAS KWY CITY-ST-7IP CITY-ST-ZIP MARATHON FL Change Addition TITLE ☐ Delete — TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if

achment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE