SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000039636 (2) 1. Corporation Name

SEAWORLD INTERNATIONAL, INC.

FILED Sep 09 1998 8:00am Secretary of State



Principal Plac	e of Bus iness	Mailing Address				
1510 S.W. 3RD		1510 S.W. 3RD STREET				
POMPANO BEA	CH FL 33060	POMPANO BEACH FL 33060				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						05/17/1995
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number Applied For
21		26				65-0583551 Not Applicable
Suite, Apt	#, e1c.	Sulte, Apt. #, etc.				\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & Stat	le	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip Country		Zip			,	8. This corporation owes or has paid the current year Intangible
24 25		29				Personal Property Tax due June 30. X Yes No
	9. Name and Address of Curre	nt Registered Ag	ent		т	10. Name and Address of New Registered Agent
SHE	Pard Leskar & Levine, P.A.			81	Name	
409	s.e. 7 T H Street		82 Street Ac		Street	Address (P.O. Box Number is Not Acceptable)
FT. (AUDERDALE FL 33301					
				83		
				84	City	85 Zip Code
				"	City	FL 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
11. Pursuan	to the provisions of sections 607.050	02 and 607.1508, F	lorida Statute	s, the above	named c	corporation submits this statement for the purpose of changing its registered
office or soent.	regist ere d agent, or both, in the Stat am familiar with, and accept the oblid	e of Florida. Such a pations of, section	change was a 607.0505. Fid	authorized by orida Statutes	the corp 3.	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered
SIGNATURE	,					
SIGNATURE	Signature, typed or printed name of registered eg-	ent and title if applicable	(NC	OTE: Registered A	gent signatu	re required when reInstating) DATE
12.	, · · · · · · · · · · · · · · · · · · ·	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE		Change Addition
NAME	RUFFINO, DANIELLE			1,2 NAME		
STREET ADDRESS	1510 S.W. 3RD STREET			1.3 STREET	ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33060			1.4 CITY-ST	-ZIP	
TITLE	D		DELETE	2.1 TITLE		Change Addition
NAME	RUFFINO, DEBORAH			2.2 NAME		
STREET ADDRESS	1510 S.W. 3RD STREET			2.3 STREET	ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33060			2.4 CITY-S1	-ZIP	
TITLE			DELETE	3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY-ST-ZIP				3.4 CITY-S1	-ZIP	
TITLE			DELETE	4.1 TITLE		Change Addition
NAME		-		4.2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	÷
CITY-ST-ZIP				4.4 CITY-S1	∵ZIP	
TITLE			DELETE	5.1 TITLE		Change Addition
NAME		Leve .		5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY-S1		
TITLE	_	Г	DELETE	6.1 TITLE	-"	Change Addition
NAME		Ĺ	") DETELL	6.2 NAME		Change L_J Addition
					*DODECC	
STREET ADDRESS				6.3 STREET	1	
CITY-ST-ZIP				6.4 CITY-S1	-7IP 1	1

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Forida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is type 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 socionation, or the feceiver or flystee 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 in an alterinient with an address.

CR2E0