

4-23-98 B- 5420 -C

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000062619 (8)

1. Corporation Name

BLUE PLANET DIVE & SURF, INC.

Principal Place of Business

C/O KIRK NEVILLE
1317B NW ST LUCIE W BLVD
PT ST LUCIE FL 34952

Mailing Address

C/O KIRK NEVILLE
1317B NW ST LUCIE W BLVD
PT ST LUCIE FL 34952



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 08/14/1995	
21	Suite, Apt #, etc	26	Suite, Apt #, etc.	4. FEI Number 65-0598661	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

NEVILLE, KIRK
1410 SAN SOUCL LN
PT ST LUCIE FL 34952

2981 SE MORNING SIDE BLVD

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
FL	85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

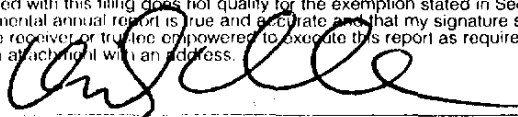
OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP	11 TITLE	
NAME	GRANT, BARRY	12 NAME	
STREET ADDRESS	372 SW JEANNE AVE	13 STREET ADDRESS	
CITY - ST - ZIP	PORT ST LUCIE FL	14 CITY - ST - ZIP	
TITLE	P	21 TITLE	
NAME	NEVILLE, KIRK	22 NAME	
STREET ADDRESS	1410 SAN SOUCL LANE	23 STREET ADDRESS	
CITY - ST - ZIP	PT ST. LUCIE FL	24 CITY - ST - ZIP	
TITLE	S	31 TITLE	VP
NAME	CLAYTON, ROBERT D.	32 NAME	
STREET ADDRESS	365 SW BELMONT CIRCLE	33 STREET ADDRESS	
CITY - ST - ZIP	PORT ST. LUCIE FL	34 CITY - ST - ZIP	
TITLE		41 TITLE	S
NAME		42 NAME	JASON CRADDOCK
STREET ADDRESS		43 STREET ADDRESS	1999 NW SUNSET BLVD
CITY - ST - ZIP		44 CITY - ST - ZIP	JENSEN BEACH
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - 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 with an address.

SIGNATURE:



4-15-98

561-871-9122

CR2E034 (10/97)