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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000077477 (4)

SEAWORKS, INC.



Principal Place	of Rusiness	B dattion : A C !						III <b>ii p</b> osi beril		
44504 044		Mailing Address								
14507 GULF Madeira Bei	BLVD. ACH FL 33708	14507 GULF BLVD. MADEIRA BEACH FL	14507 GULF BLVD. Madeira Beach FL 33708							
						3.	Date Incorporated or Qualified 10/05/1995	3a. C	ate of Last	Report
Principal Place of Business 21		2a. Mailing Address			4.				Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite Apt. #, etc		••		<del></del>			\$0.7	5 Additional
22		27				5.	Certificate of Status Desired			Bequired
City & State	8	Oty & State				6.	Election Campaign Financing			· · · · · · · · · · · · · · · · · · ·
23		28					Trust Fund Contribution			00 May Be led to Fees
Zip	Country	Zır>	Cou	untry			This corporation has liability for	r intangible		
24	25	29	30				Florida Statutes 🔲 Ye		a tax andor	3 133.002,
<del></del>	9. Name and Address of Cur	rent Registered Agent		I		10.	Name and Address of New	Registere	d Agent	
				81	Name			-		
	i, stephen			82	Stroot Add	kone (D	O Box Number o Not Acces	abt-s)		
	ULF BLVD.			[ 2	oree: Add	dress (P.O. Box Number is Not Acceptable)				
MADEIR/	A BEACH FL 33708			83		- Was				
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				l i	City			F		Zip Code
11. Pursuant t	to the provisions of Sections 607.05	502 and 607.1508, Florida State	tes, the abo	ove-na	med corpo	ration si	ibmits this statement for the p	<u></u>	$=$ $\dots$	registered offic
	red agent, or both, in the State of Fl th, and accept the obligations of, S			corpor	ration's boa	ard of dir	ectors. Thereby accept the ap	pointment	as registere	ed agent. I am
SIGNATURE										
	Signature, typied or printed name of registered a	gent a stitle day ploace (n	OTE Boyelered			et when he	ستنا بسيبات بالمغروري	JATE		
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this annuli report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under typication of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name typically an attachment with an address. oath: that I am an officer or director of appears in Block 12 or Block 13 if ch

STEPHEN E. A SHTON