

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000078831

1. Corporation Name
DEEP BLUE SEA, INC.

Principal Place of Business
20377 N.E. 15TH COURT
MIAMI FL 33179

Mailing Address
20377 N.E. 15TH COURT
MIAMI FL 33179

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90007 004 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/13/1995

4. FEI Number
65-0655931

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PERETZ, ANDREW B ESQ
ONE EAST BROWARD BLVD., SUITE 620
BARNETT BANK PLAZA
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name FRANK LEGOW
82 Street Address (P.O. Box Number is Not Acceptable)
20377 NE 15th Court
83
84 City MIAMI FL 85 Zip Code 33179

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 title if applicable.

FRANK LEGOW Secretary

4/28/99
DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	LOGOW, ERIC	
STREET ADDRESS	20377 NE 15 COURT	
CITY-ST-ZIP	MIAMI FL 33179	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	O'NEILL, GEORGE	
STREET ADDRESS	20377 N.E. 15TH COURT	
CITY-ST-ZIP	MIAMI FL 33179	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	LEGOW, FRANK	
STREET ADDRESS	20377 N.E. 15TH COURT	
CITY-ST-ZIP	MIAMI FL 33179	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2 NAME	LEGOW, ERIC
1.3 STREET ADDRESS	(Spelling Correction)
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANK LEGOW 4/28/99

(305) 653-7440

CR2E034 (11/98)