

5-9-97 B-6816 C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000006281 (5)

1. Corporation Name

POW'R SCRUB UNDERWATER SERVICES, INC.

Principal Place of Business

4324 WEST 20TH STREET APT. A201
PANAMA CITY FL 32405

Mailing Address

POST OFFICE BOX 15132
PANAMA CITY FL 32406-5132

3. Date Incorporated or Qualified

01/22/1996

3a. Date of Last Report

2. Principal Place of Business

21 3924 VICAR

Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22

City & State

23 PANAMA CITY BEACH FL

Zip

24 32408

Country

25 BAY

City & State

27

Zip

29

Country

30

4. FEI Number

59-3356314

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

MORGAN, VAN M
4324 WEST 20TH STREET APT. A201
PANAMA CITY FL 32405

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3924 VICAR

83

84

PANAMA CITY BEACH

FL

85 Zip Code

32408

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 607.0506, Florida Statutes.

SIGNATURE

Van M Morgan

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-97

12. OFFICERS AND DIRECTORS

TITLE • ☐ DELETE

NAME
D MORGAN, VAN M
STREET ADDRESS
4324 WEST 20TH STREET APT. A201
CITY- ST- ZIP
PANAMA CITY FL 32405

TITLE • ☐ DELETE

NAME
D MORGAN, JO A
STREET ADDRESS
4324 WEST 20TH STREET APT. A201
CITY- ST- ZIP
PANAMA CITY FL 32405

TITLE • ☐ DELETE

NAME
D MORGAN, RAYMOND J
STREET ADDRESS
4324 WEST 20TH STREET APT. A201
CITY- ST- ZIP
PANAMA CITY FL 32405

TITLE • ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE • ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE • ☐ DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
(ADDRESS)

1.2 NAME
1.3 STREET ADDRESS 3924 VICAR
1.4 CITY- ST- ZIP PANAMA CITY BEACH FL 32408

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 3924 VICAR
2.4 CITY- ST- ZIP PANAMA CITY BEACH FL 32408

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 3924 VICAR
3.4 CITY- ST- ZIP PANAMA CITY BEACH FL 32408

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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:

Van M Morgan REQUAN M MORGAN

4-28-97

904-235-0544

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)