

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90028 031 ***150.00

DOCUMENT # P96000006281

1. Corporation Name

POW'R SCRUB UNDERWATER SERVICES, INC.

Principal Place of Business

3924 VICAR
PANAMA CITY BEACH FL 32408
US

Mailing Address

POST OFFICE BOX 15132
PANAMA CITY FL 32405-5132

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/22/1996

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 owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21 2105 Mound Avenue
Suite, Apt. #, etc.

2a. Mailing Address

26 Same as above
Suite, Apt. #, etc.

City & State

23 Panama City, FL

City & State

28

Zip Country

24 32405 25 USA

Zip Country

29 32406 30 USA

9. Name and Address of Current Registered Agent

MORGAN, VAN M
3924 VICAR
PANAMA CITY BEACH FL 32408

10. Name and Address of New Registered Agent

81 Name
Raymond J. Morgan

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

2105 Mound Avenue

83

84 City

Panama City

FL

85 Zip Code

32405

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 agent 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 Raymond J. Morgan PRESIDENT

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

(NOTE: Registered Agent signature required when reinstating)

4/26/99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME MORGAN, VAN M

STREET ADDRESS 3924 VICAR

CITY-ST-ZIP PANAMA CITY BEACH FL

TITLE D ☒ DELETE

NAME MORGAN, JO A

STREET ADDRESS 3924 VICAR

CITY-ST-ZIP PANAMA CITY BEACH FL

TITLE D ☐ DELETE

NAME MORGAN, RAYMOND J

STREET ADDRESS 3924 VICAR

CITY-ST-ZIP PANAMA CITY BEACH FL

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 P ☒ Change ☐ Addition

1.2 NAME Raymond J. Morgan

1.3 STREET ADDRESS 2105 Mound Avenue

1.4 CITY-ST-ZIP Panama City, FL 32405

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Kerri T. Morgan

2.3 STREET ADDRESS 2105 Mound Avenue

2.4 CITY-ST-ZIP Panama City, FL 32405

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/99

(850) 866-3043

Date

Daytime Phone #

CR2E034 (11/98)