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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000018739 (8)

T & S ATLANTIC OCEAN, INC.

FILED Apr 24 1998 8:00am Secretary of State



4/22/18

	OCEAN BOULEVARD EACH FL 33062	900 NOR	900 NORTH OCEAN BOULEVARD POMPANO BEACH FL 33062				DO NOT WRITE IN THIS	SPACE		
							<ol> <li>Date Incorporated or Qualified</li> <li>02/23/1996</li> </ol>			
2. Principal Pla	ice of Business	2a, Mailing	2a, Mailing Address				4. FEI Number			ied For
21	·	26	+				65-0651418		<del></del>	Applicable
Suite, Apt. #		27					5. Certificate of Status Desired		75 Add e Requ	
City & State		Oity & S 28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Z(p)		Country			8. This corporation owes or has paid the 🖎		ar Intan	
24	25	29					Personal Property Tax due June 30. Yes No.			
9. Name and Address of Current Registered Agent						Mania	10. Name and Address of New Hegisteren	Agent		
	I <b>dz</b> arov, Louise e			81	' '	Name				
	5 W OAKLAND PARK BLVI		82 Street Ad			Street Addr	ress (P.O. Box Number is Not Acceptable)			
FC	ORT LAUDERDALE FL 3331	1								
				83	<b>'</b>					
				84	1	City	FL	85	Zip Co	de
11. Pursuant to the provisions of Scotions 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 an	n familiar with, and accept the c	obligations of, Section	607.0505, Flori	da Statute	es.	is corporati	interpretation displacement in the control of the c		0	giolorou
SIGNATURE 5	Signature, typed or pented name of register	ed noest and trie if applicable	/NOTE	Hogistered Ac	aent s	signature require	reo when reinstating) DATE			
12.		S AND DIRECTORS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS	IN 12
TITLE	D		DELETE	1.1 HITLE				Cha		Addition
NAME	DUGAN, JAMES A			1.2 NAME						
STREET ADDRESS	900 NORTH OCEAN BO	DULEVARD		1.3 STRFE	T AD	IDRESS				
CITY-ST-ZIP	POMPANO BEACH FL	33062		1.4 CITY-1	ST - 2	ZIP				
TITLE	D	Ţ	DELETE	21 TITLE				Cha	пде	Addition
NAME	WARD, HARRY J			2.2 NAME						
STREET ADDRESS	900 NORTH OCEAN BO		2.3 STR		1 AD	DRESS				
CITY-ST-ZIP	POMPANO BEACH FL			2. 4 CITY-	- 51 -	7/P				
TITLE			DELETE	3 1 1ITLE				Cha	inge	Addition
NAME				3.2 NAME						
STREET ADDRESS				3 3 STAFF	T AD	DRESS				
CITY-ST-ZIP				3 4. CITY-	- S1 -	ZIP				
TITLE		L	DELETE	4 1 THLE				[_] Cha	nge	Addition
NAME				4 2 NAME	Ŀ					
STREET ADDRESS				4.3 STREE	1 AD	DRESS				
CITY-ST-ZIP		<del>-</del>	T no. care	4.4 CHY-	•••	ZIP				722000
TITLE		L	DELETE	5.1 TITLE				[] Cha	inge [	Addition
NAME				5.2 NAME		1				
STREET ADDRESS				5.3 STREE		- 1				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	DELETE	5.4 CITY - :		7IP		Cha	ingo I	Addition
TITLE		L	DELETE	6.1 TITLE				LJ Ulla	ແທ່ຊີຮ [	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREE						
CITY-ST-ZIP	while that the information count	and with the films done	e not qualify for	6.4 CITY-			Section 119.07(3)(i), Florida Statutes, I further of	ertify the	t the in	formation
Indicated of officer or d	an this annual report or suppler	nental annual report is 5 receiver or trustee 60	true and accur apowered to ex	rate and th	hali	my signatur	re shall have the same legal effect as if made u uired by Chapter 607, Florida Statutes; and that	nder oat	h that i	Lam an