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

PROFIT CORPORATION ANNUAL REPORT



FLÖRIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P 96006029045

HISTORIC SHIPWRECK EXPEDITIONS JWG.

Principal Place of Business

Mailing Address

1900 SO OCEAN BLUD. APT 12K

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	AND
	FILED



1997 SEP 17 PM 1: 27

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Dr M	PANO BCH F	1 33062			
₩ ₩	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9		3. Date incorporated or Qualified 3/28/96	3a. Date of Last Report
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
	SO OCEAN BLUD !		M BWO.		Not Applicable
Suite, Apt 22		Suite, Apt. #, etc. 27 APT 12K		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	APHNO OCH, PL B		BCH.FL.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33(Country 30 USA		Yes 🔯 No
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Reg	pistered Agent
			82 Street	HOWARD LEVE NTHA Address (P.O. Box Number is Not Acceptable So OCEAN BLVD.	9L PPT 12K
			84 Giy	APAND BCH.	FL 85 Zip Code 33062
office or a agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with and accept the to	502 and 607.1508, Florida Statule ite of Florida, Such change was in ligation (vil., Section 607.0505, Joi	uthorized by the corp ida Statutes.	corporation submits this statement for the proporation's board of directors. I hereby accept	urpose of changing its registered t the appointment as registered
SIGNATURE	Signature typical or profit of name of registered	eyer Land the diapplicable (NOTE	FUBWA Registered Ager 1's gnature		DATE 7(2/ 7 /
12.	OFFICERS /	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE		☐ DELETE	1.1 TITLE	Pf3]D	Change Addition
NAME	-		1.2 NAME	HOWARD LEVENT.	$\mu\mu\iota$
STREET ADDRESS			1.3 STREET ADDRESS	1900 So. OCEAN BLI POMPANO BCH, FL	ud ILK
CITY-ST-ZIP			1.4 CITY - \$1 - ZIP	POMPANO BCH, FL	33062
TITLE		☐ DELETE	2.1 TILE		Change Addition
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NAME			62 NAME		1/5/2/10/1
STREET ADDRESS			G 3 STREET ADDRESS		~KW h
CITY-ST-ZIP			6.4 CITY - ST - ZIP		W

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 armidal report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation or the receiver or trustice 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: HOWARD LEVENTHAL SIGNATURE AND TYPEGOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Historic Shipwrock Expeditions, Inc.

1900 S. Ocean Blvd. #12K Pompano Boach, Florida 33062 U.S.A

Phone 954 491-4565 Fax 954-899-9775

September 13, 1997

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Subject: Historic Shipwreck Expeditions, Inc.

Ref. Number: P96000029045 Letter Number: 197A00021568

Dear Sir/Madam:

Due to a change of address the returned forms were delivered to the wrong address. We were unaware that the corporation documents were not filed untill Sept. 10, 1997. The check in the amount of \$165.00 was mailed to you in April 1997 and never cashed. We are sending a new check with the Annual Report in hopes it meets your satisfaction. We apologize for the misunderstanding. Our permanent mailing address is as follows:

> Historic Shipwreck Expeditions, Inc. C/O Ruben Leventhal 1900 S. Ocean Blvd. Apt. 12 K Pompano Beach, Florida 33062-8023

> > Sincerely,

Capt. Howard Leventhal

President