2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) P96000075848 DOCUMENT

CH ED

May 01, 2003 8:00 am
Secretary of State 05-01-2003 90217 012 ***150.00

UNDERW	ATER SCIENCE RESEARC	H AND DEVELOPMEN	IT, INC		03-01-2003 90	217 012	150.0		
Principal Place of Business 7 SEA WATCH TER ORMOND BEACH FL 32176 US		Mailing Address 7 SEA WATCH TER ORMOND BEACH FL 32176 US							
2. Principal Place of Business		3. Mailing Address			{				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State		4.	FEI Number 59-3400065	Applied Fo Not Applica			
Zip	Country	Zip	Zip Country		Certificate of Status Desired	ed S8.75 Additional Fee Required			
	6. Name and Address of Curren	t Registered Agent		7.	Name and Address of New Reg	istered Agen	t]
HUGUS: 0	SEORGE D III		Nam						
7 SEA WATCH TER ORMOND BEACH FL 32176			Stree	t Address (P.O. E	Box Number is Not Acceptable)	<u>.</u> .			1
ORWOND	DEACH PE 32170	City				FL	Zip Code	<u>-</u>	{
SIGNATURE -	named entity submits this statement files of registered agent. Signature, typed or printed name of registered agent LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	t and title if applicable. (NOTE: F		or registered as		DATE	\$5.00	May Be to Fees	
10.	OFFICERS AND	DIRECTORS	11.	AI	DDITIONS/CHANGES TO OFFICE	ERS AND DIR	ECTORS	IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUGHES, GEORGE 7 SEA WATCH TER ORMOND BEACH FL 32176	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	HUG	·US, GEORGE		Change	Addition	CR2E034 (10/02)
TITLE NAME - STREET ADDRESS CITY-ST-ZIP	V IVEY, LARRY 3017 SARASOTA DR ORLANDO FL 32806	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	30	47 Saratogo	, Dr	Change	Addition	CR
TITLE NAME STREET ADDRESS CITY-ST-ZIP	v Walden, Alan 1438 hyde paek dr Winter Park Fl 32792	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	ss	• `	~ <i>~</i> 💭 :	Change =:	☐ Addition	
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NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	<u> </u>	110 07(9Vi) Florida Statutos 1 fe		Change	Addition	

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND YEED OR PRINTED NAME OF SUNNING OFFICER OR DIRECTOR

4-28-2003