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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block 13 if change

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jun 04 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000099199 (7)

FLORIDA RECREATIONAL & TECHNICAL DIVERS, INC.

19834 EASY STREET 1.3634 EASY STREET HUDSON FL 34869 HUDSON FL 34669-2339 3. Date incorporated or Qualified 3a. Date of Last Report 12/09/1996 Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 59-3414598 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 29 25 30 g, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent AMERILAWYER CHARTERED STEINGART 343 ALMERIA AVENUE 82 **CORAL GABLES FL 33134** 13634 EASY 84 HUDSON Pursuant to the provisions of Sections 607.9502 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 607.0505, Florida Statutes. MARK (VSD of FL. REC. ETECH, STEINGART **SIGNATURE** OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96 6 6 PTD TITLE DELETE 1 1 TITLE Change Addition SOMERS, ELIZABETH A NAME 12 NAME 13634 EASY STREET STREET ADDRESS 1.3 STREET ADDRESS **HUDSON FL 34669** CITY-ST-ZIP 14 CITY - ST - ZIP TITLE DELETE Change Addition 2.1 TITLE STEINGART, MARK C NAME 2.2 NAME 13634 EASY STREET STREET ADDRESS 2 3 STREET ADDRESS **HUDSON FL 34669** CITY-ST-ZIP 2 4 City - St - ZIP TITLE DELETE Change Addition 3.1 TIFLE NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP ☐ DELE1E TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 7(P DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP DELETE TITLE Addition 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - S1 - 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 eath; 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