SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1998 DOCUMENT #

## **FILED** Sep 24 1998 8:00am Secretary of State

1. Corporation Name P96000099199 (7)				
FLORIDA RECREATIONAL & TECHNICAL DIVERS, INC.				
		,		E INGRIGER IN ANTO BRILL
Principal Plac	e of Business	Mailing Address		1 150 1440 116 15110 01111 00111 00111 01111 01111 01111 01111 14011
13634 EASY STREET 13634 EASY STREET				
HUDSON FL 34	869	HUDSON FL 34669		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
l				12/09/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21 602	5 HOPE HILL RE	26 6025 401	PE HILL KO	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State City & State			144 E +.	6. Election Campaign Financing \$5.00 May Be
23 512C	Country	28 3 200KS	Country C	Trust Fund Contribution
24 346	01 25 U.S.	29 34601	30 US.	This corporation owes or has paid the current year intengible     Personal Property Tax due June 30. Yes No
ļ	9. Name and Address of Current I	Registered Agent	[64] 11	10. Name and Address of New Registered Agent
STEINGART, MARK C. STEINGART				
13634 EASY ST 82 Stree				
HUDSON FL 34669			83	13634 Ensy 6025 HOPE HILL Rd.
ļ			63	
			84 City	BROOKS VILLE FL 85 ZIP COde 34601
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				
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.				
SIGNATURE				
<u> </u>	Signature, typed or printed name of registered agent a		OTE: Registered Agent signatur	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	SOMERS, ELIZABETH A	DELETE	1.2 NAME	Change Addition
STREET ADDRESS	13634 EASY STREET	·	1,3 STREET ADDRESS	War ingal live of
CITY-ST-ZIP	HUDSON FL 34669		1.4 CITY-ST-ZIP	STEINGART, MARK C 6025 HOPE HILL Rd. BROOKSVILLE, FL 34601
TITLE	VSD	DELETE	2.1 TITLE	Change Addition
NAME	STEINGART, MARK C	y societie	2.2 NAME	E Change E Position
STREET ADDRESS	13634 EASY STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP	HUDSON FL 34669		2.4 CITY-ST-ZIP	·•
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	-
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4.2 NAME	ł
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	with that the information cumpled with the	le filing dose not qualify for the	6.4 CITY-ST-ZIP	section 119 07/3Vi) Florida Statutes I further certify that the information

a necess certify that the miormation supplied with rins illing does not quainy 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 **cat**h; 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.

83 966 6630