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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100682

SOUTHERN SEAS (AGENCIES), INC.

Prir	ncipal Place of Business
2605	5 THOMAS DRIVE
PAN	5 THOMAS DRIVE TE 225 IAMA CITY BEACH FL 32408

FILED May 11, 1999 8:00 am Secretary of State

05-11-1999 90036 021 ***150.00



Suite, Apt. #1. stc. Suite, Apt. #1. stc. Suite, Apt. #1. stc. S. Certificate of Status Desired \$8.75. Addition Fear Required Status Desired \$5.00 May Seat Status Stat	Principal Place	e oi ausiness	Mailing Address			
PANAMA CITY SEACH FL 32408						
2. Principal Place of Business 2a. Mailing Address 4. FEI Number 1. Applied For S9-342 1279 59-342 1279 1. Text Applied For S9-342 1279 1. Text Found Control Few Registered Agent 1. Tex				33400		DO NOT WRITE IN THIS SPACE
12/12/1996	PANAMA CHT	BEACH FL 32408	PANAMA CITT BEACH FL 3	32400		
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25		Country		Country	,	
SLOAN, TIMOTHY J 427 MEKENZIE AVENUE PANAMA CITY FL 32401 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 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, and accept the oxigination of, Section 607.6505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the oxigination of, Section 607.6505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the oxigination of, Section 607.6505, Florida Statutes. SIGNATURE 12		25	29	30		
SLOAN, TIMOTHY J 427 MEKENUE PANAMA CITY FL 32401 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 88 City FL 85 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip Code 89 City FL 85 Zip Code 80 City FL 85 Zip Code 80 City FL 85 Zip Code 81 Signature, the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. In familiar with, and accept the obligations of, Section 607.0505, Florida Statutes 81 Signature, typical name of 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, or both, in the State of Florida. Statutes 81 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 82 Signature, typical name of 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, or both, in the State of Florida. Statutes 83 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 84 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 85 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 86 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 87 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 88 City. St. Zip 88 City. St. Zip 89 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 89 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 89 Signature, typical name of registered agent, or both, in the State of Florida. Statutes 89 Signature, typical nam						10. Name and Address of New Registered Agent
427 MEKENZIE AVENUE PANAMA CITY FL 32401 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes have been ended corporation submits this statement for the purpose of changing its register 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or privated name of impatered sport and the if accitable. POFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 TITLE POSITION DIRECTORS IN 1 BROWN, DONALD L 12 NWE 13 STREET ADDRESS CITY-ST-ZP TITLE VACCARO, MARK A 22 NWE 33 STREET ADDRESS CITY-ST-ZP TITLE DELETE 11 TITLE DELETE 21 TITLE DELETE 31 TITLE DELETE 31 TITLE DELETE 31 TITLE DELETE 41 TITLE DELETE 51 TITLE DE				81	Nam	me
### A27 MERCENZIE AVENUE PANAMA CITY FL 32401 ### B4 City FL 85 Zip Code ### City FL 85 Zip Co	SLO	an, timothy j		96	Chan	and Address (D.O. Ray Number in Not Accompable)
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 register 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, and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 TITLE P OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 TITLE P OFFICERS AND DIRECTORS IN 1 TITLE P OFFICERS AND DIRECTORS IN 1 TITLE VACCARO, MARK A 13 STREET ADDRESS CITY-ST-ZP TITLE VACCARO, MARK A 22 NAME STREET ADDRESS OFFI-CHANGES IN 1 TITLE OFFI-CHAN				52	Stree	set Address (P.O. Box Number is Not Acceptable)
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 register of 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, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Tale	PAN	AMA CITY FL 32401		83	1	
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 register of 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, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Tale					_	
11. Pursuant to the provisions of Sections 607 6502 and 607 1508. Plorida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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, in the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both the collegations of Section 607.9505, Florida Statutes. SIGNATURE				84	City	/ FI 85 Zip Code
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of director's. I nereby accept tine appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of director's. I nereby accept tine appointment as registered agent and accept the obligations of, section 607. Section 60	11 Purcuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Statute	es the abov	e-name	ned corporation submits this statement for the purpose of changing its registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Repetitived Agent signature required when reinstabling)	office or r	egistered agent, or both, in the Sta	ite of Florida. Such change was at	uthorized by	the co	orporation's board of directors. I hereby accept the appointment as registered
Signature, typed or primited pageletated label, included the displaced label, included the remission of prices and Directors in 1 Title	agent. I a	m familiar with, and accept the obli	igations of, Section 607.0505, Flor	nda Statutes	3.	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS M.14	SIGNATURE	Standard of a sighten	ANOTE:	Ponietered Ane	ot expostu	ture required when reinstating)
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR