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

PROFIT CORPORATION ANNUAL REPORT



Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P97000036286 (7)

FILED Jan 21 1998 8:00am Secretary of State

SEASUREN WATERCHAFT INC.				
Principal Place of Business Mailing Address			· · · · · · · · · · · · · · · · · · ·	
P.O. BOX 522664 P.O. BOX 522664 MARATHON SHORES FL 33052 MARATHON SHORES FL		33052	DO NOT WRITE IN THIS SPACE	
1				3. Date Incorporated or Qualified
1				04/21/1997
2. Principal Place of Business 2a. Mailing Address			\ 1	4. FEI Number Applied For
21 Driftwood Marina 26 133900 Ou			ierseas H	vvy. 65-0765323 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired - \$8.75 Additional
22 27				Hee Hequired
City & Stat	rathon Fl.	City & State 28 Marath	on. FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 330	50 25 Monroe	29 33050 3	$_{0}/V$) on you	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent				
SIBLEY, CLEVELAND C 81 Name				
814 30TH STREET				Address (P.O. Box Number is Not Acceptable)
MARATHON FL 33050				·
			83	
			84 City	85 Zip Code
FL 15 257 500 FL				
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				
	Signature, typed or printed name of registered agen		Registered Agent signature	
12.	OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME			1.2 NAME	
STREET ADORESS			1.3 STREET ADDRESS	Cleveland C. Sibley 814 30th St
CITY-ST-ZIP			1.4 CITY-ST-ZIP	Marathan, FL
TITLE		DELETE	2.1 TOLE	Change Addition
NAME			2.2 NAME	•
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			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	L Change L Addition
NAME			4.2 NAME	
STREET ADDRESS			4 3 STREET ADDRESS	
CYTY - ST- ZIP			4.4 CITY-ST-ZIP	Change
TITLE		☐ DÉLETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY - ST - ZIP		DELETE	5.4 CITY-ST-ZIP 6.1 YITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS		•	6.3 STREET ADDRESS	,
CITY-ST-ZIP			6.4 CITY-ST-ZIP	
	ertify that the information supplied with	this filing does not qualify for		d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as recorded by Chapter 607. Florida Statutes, and that my name appears in				