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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FI ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000087936 (5)

SEA-CARE PRODUCTS, INC.

## FILED May 15 1998 8:00am Secretary of State



| Principal Place   | e of Business  | Mailing Address                       |                      |  |
|---|--|---------------------------------------|----------------------|--|
| 9741 BERECHAH DR.   |  | 9741 BERECHAH DR.                     |                      |  |
| HOLLYWOOD FL 83024  |  | HOLLYWOOD FL 33024                    |                      | DO NOT WRITE IN THIS SPACE   |
|   |  |                                       |                      | 3. Date Incorporated or Qualified  |
|   |  |                                       |                      | 10/10/1997   |
| 2. Principal P  | lace of Business   | 2a, Mailing Address                   |                      | 4. FEI Number Applied For  |
| 21  |  | 26                                    |                      | 65-683/420 Not Applicable  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.                   |                      | SR 75 Additional   |
| 22  |  | 27                                    |                      | 5. Certificate of Status Desired L Fee Required                                  |
| City & State  |  | City & State                          |                      | 6. Election Campaign Financing \$5.00 May Be                                     |
| 23  |  | 28                                    |                      | Trust Fund Contribution Added to Fees  |
| Zip   | Country  | <b>7</b> φ                            | Country              | 8. This corporation owes or has paid the current year Intangible                 |
| 24  | 25   |                                       | 30                   | Personal Property Tax due June 30. Yes No  |
|   | Name and Address of Curren   | t Hegistered Agent                    | 81 Name              | 10. Name and Address of New Registered Agent                                     |
| PROCION, MICHE  |  |                                       |                      |  |
| 9741 BERECHAH DR.<br>HOLLYWOOD FL 33024   |  |                                       | 82 Street Add        | dress (P.O. Box Number is Not Acceptable)  |
|   |  |                                       | 83                   |  |
|   |  |                                       | 84 City              | FL 85 Zip Code   |
| 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 registere  |  |                                       |                      |  |
| 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, typod or printed name of registered agent and blied applicable. (NOTE Registered Agent signature required when reinstating)  DATE  |  |                                       |                      |  |
| 12.   | OFFICERS AN  |                                       | 13.                  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                |
| TITLE   | PSTD   | DELETE                                | 1.1 TITLE            | Change Addition  |
| NAME  | PROCTOR, MICHIE  | <del></del>                           | 1.2 NAME             |  |
| STREET ADDRESS  | 9741 BERECHAH DR.  |                                       | 1.3 \$TREET ADDRESS  |  |
| CITY-ST-ZIP   | HOLLYWOOD FL 33024   |                                       | 1.4 City - St - ZIP  |  |
| TITLE   |  | DELETE                                | 2.1 THTLE            | 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   | And the second s |                                       | 3.4. C(TY - ST - ZIP |  |
| TITLE   |  | L DELETE                              | 4.1 TITLE            | Change Addition  |
| NAME  |  |                                       | 4. 2 NAME            |  |
| STREET ADDRESS  |  |                                       | 4.3 STREFT 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   |  | T beleer                              | 5.4 CITY - ST - ZIP  | Channel Lands  |
| TITLE   |  | ☐ DELETE                              | 6.1 TITLE            | ☐ Change ☐ Addition  |
| NAME  |  |                                       | 6.2 NAME             |  |
| STREET ADDRESS  |  |                                       | 6.3 STREET ADDRESS   |  |
| CITY-ST-ZIP   | ale at a B   | (t. 1ti. Ch., Jan                     | 6.4 CITY-ST-ZIP      | n Section 119.07(3)(i). Florida Statutes. I further certify that the information |

4. 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 project empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chart or an extraction with an address.

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