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

PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State DIVISION OF CORPORATIONS	

FILED
Mar 05, 1999 8:00 am
Secretary of State
03-05-1999 90116 048 ***150.00

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DOCUMENT # P97000095203

1. Corporation Name

UNIVERSAL DIVE & LAUNCH, INC.

Principal Place of Business	Mailing Address
4200 POINSETTIA AVENUE WEST PALM BEACH FL 34407	4200 POINSETTIA AVENUE WEST PALM BEACH FL 34407

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
11/06/1997

4. FEI Number 65-0794223	Applied For / Not Applicable

5. Certifcate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. — 22	Suite, Apt. #, etc. — 27
City & State — 23	City & State — 28
Zip — 24	Country — 25	Zip — 29	Country — 30

9. Name and Address of Current Registered Agent

HOWE, GREGORY T
120 JEFFERSON AVENUE
SUITE 12017
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81	Name
82	Street Address (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 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 agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

CR2E034 (11/98)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BECK, RICHARD B		1.2 NAME	
STREET ADDRESS	315 POTTER ROAD		1.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33405		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BECK, WILLIAM		2.2 NAME	
STREET ADDRESS	208 SUMMA STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33405		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	CARROLL, SAMMY B JR		3.2 NAME	
STREET ADDRESS	7601 E. TREASURE DRIVE #PH212		3.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141		3.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	HOWE, GREGORY T		4.2 NAME	
STREET ADDRESS	120 JEFFERSON AVENUE #12017		4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL 33139		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			6.4 CITY-ST-ZIP	

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: _William D Beck_   2/19/99   561-844-9056

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #