PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90070 015 ***150.00

i. Corporador	MENT # P98000 OCEAN #1, INC.	007598					
Principal Place	e of Business	Mailing Address			T SERVISE DE SION CONDENSATE DE DISTREBUIR DE DISTREBUIR DE DISTREBUIR DE DESIR DE	00411 10001 9 1160 1	DIVI 1811 (80)
2315 STIRLING		2315 STIRLING ROAD					
FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312			312				
	-		-	- ~	DO NOT WRITE: IN THIS	SPACE =-	<u> </u>
				-	3. Date Incorporated or Qualifed 01/23/1998	_	
2. Principal Pl	lace of Business	2a. Mailing Address		_	4. F51 Number 170 54		olied For
21		26			(0)-(0) a du		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Red	
22		City & State		_			
City & State	e	— ´			6. Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	
Zip	Country	Zip	Count		This corporation owes the current year In		7.000
24	25	29	30	•	Personal Property Tax.		□No
	9. Name and Address of Curren				10. Name and Address of New Registered	Agent	
			8	1 Name			
CHESS, AMOS 2315 STIRLING ROAD			8	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
FOR	T LAUDERDALE FL 33312		8	3			
				4 City		85 Zip C	'ode
			8	1 1	Fl	_ ` `	
. 11. Pursuant office or reagent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	02 and 607.1508, Florida Statut of Florida. Such change was a ations of, Section 607.0505, Flo	es, the abo uthorized b rida Statute	ve-named co y the corpora s.	rporation submits this statement for the purpose o tion's board of directors. I hereby accept the appo	f changing its intraent as rec	registered
SIGNATURE		MOTE A STATE OF THE STATE OF TH	. Danistand &	- at migrature requi	ired when reinstating) DATE		
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	ent signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PSD	DELETE	1.1 TITLE			Change	☐ Addition
NAME	CHESS, AMOS		1.2 NAME				1
STREET ADDRESS	2315 STIRLING ROAD			ET ADORESS			ļ
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		1.4 CITY-	!			
TITLE	VTD	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	HEBY, JACKY		2.2 NAME	:			
STREET ADDRESS	2315 STIRLING ROAD		2.3 STRE	ET ADDRESS			1
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		2. 4 CITY	-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME	:			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY	-ST-ZIP	• '		
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAM	E	· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS			4.3 STRE	ET ADORESS			Ì
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	51 TITLE	1	·	Change	Addition
NAME			5.2 NAME		•		
STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-			_	
TITLE		☐ DELETE	6.1 TITLE	1		☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS	1		6.3 STRE	ET ADDRESS			

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS