2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 17, 2005 08:00 AM DOCUMENT # P98000024244 **Secretary of State** CAPT. SCUBA, INC. Principal Place of Business Mailing Address 84001 OVVERSEAS HIGHWAY 84001 OVVERSEAS HIGHWAY ISLAMORADA, FL 33036 ISLAMORADA, FL 33036 US CR2E034 (10/03) 03012005 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0826847 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent **AMERILAWYER** DO NOT WRITE 343 ALMERIA AVENUE CORAL GABLES, FL 33134 IN THIS SPACE 3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE NEWTH, TERRY J NAME STREET ADDRESS 84001 OVVERSEAS HIGHWAY 000000265326 03/17/05-80047-022 150.00 CITY-ST-7IP ISLAMORADA, FL 33036 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

FILED