

NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999

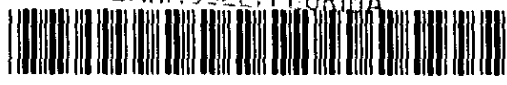


FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



DOCUMENT # P98000035048 Corporation Name

AQUAWORLD OF KEY WEST, INC.

Principal Place of Business: KEY PLAZA #222, KEY WEST FL 33040. Mailing Address: 1107 KEY PLAZA #222, KEY WEST FL 33040.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/16/1998. 4. FEI Number: 65-0850290. 5. Certificate of Status Desired: \$8.75 Additional Fee Required. 6. Election Campaign Financing: \$5.00 May Be Added to Fees. 8. This corporation owes the current year Intangible Personal Property: Yes [ ] No [X]

9. Name and Address of Current Registered Agent

KOCIS, STEVEN 1107 KEY PLAZA #222 KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name, 82 Street Address, 83, 84 City, 85 Zip Code (FL)

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: Steven Kocis Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: 1-5-00

Table with 2 main columns: OFFICERS AND DIRECTORS (12 rows) and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (12 rows). Includes names like Steven Kocis, Donella Kocis, and various titles and addresses.

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.

SIGNATURE: Steven Kocis, President + Chairman of Board Div. 1-5-00 305 292-3300

CR2E034 (5/99)