## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Aug 30, 2004 8:00 am Secretary of State **DOCUMENT # P99000019628** 08-30-2004 90004 011 \*\*\*150 00 ADVANCED DIVER MAGAZINE, INC. Principal Place of Business Mailing Address 3115 48TH AVENUE DRIVE EAST 3115 48TH AVENUE DRIVE EAST 54070740 BRADENTON, FL 34203 BRADENTON, FL 34203 2. Principal Place of Business 327 Snapdra 3. Mailing Address 327 Suite, Apt. #, etc. Suite, Apt. #, etc. 08022004 CR2E034 (10/03) Applied For City & State 4. FEI Number City & State .den 65-0899426 Brad Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BOWEN-CURTIS L- ---Street Address (P.O. Box Number is Not Acceptable) 3116-48TH AVENUE DRIVE EAST BRADENTON, FL-34203 pose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement for the obligations of registe 8/10/04 SIGNATURE. Signature, typed or printed name (NOTE: Registered Agent stansture required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. TITLE PD TITLE Change ☐ Addition Delete BOWEN, CURTIS L NAME NAME STREET ADDRESS STREET ADDRESS 3115 -48TH AVE DR E BRADENTON, FL 34203 CITY-ST-ZP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TIFLE **BOWEN, LINDA** MANG NAME STREET ADDRESS 3115 -48TH AVE DR E STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34203 CITY-ST-ZIP Change TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-7P CITY:ST:78P ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TIRE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplied entail 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 for execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachy ther like empowered.

**FILED** 

8/10/04

941.748-3483