2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am & Secretary of State **DOCUMENT #** P99000048984 1. Entity Name 05-28-2002 91716 027 ***150 00 SEVEN SEAS AQUARIUM, INC. Principal Place of Business Mailing Address 2628 SR 434 ロッとエビびんぎ 2628 SR 434 LONGWOOD FL 32779 LONGWOOD FL 32779 434 Ns r Suite Apt. # etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Altamort 59-3587186 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired П USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUSSO, ELIO C/O SEVEN SEAS AQUARIUM 2628 W. SR 434 LONGWOOD FL 32779 8. The above named entity submits this statement for the purpose of changing its registered office or register ed agent, or both, in the State of Florida 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (9/01) 🗹 Delete TITI F Change ☐ Addition NAME RUSSO, ELIO NAME STREET ADDRESS 218 WIND MEADOW CIR STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701 CITY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME RUSSO, GEORGE STREET ADDRESS STREET ADDRESS 109 BRENTTEY HARTER CITY-ST-ZIP CITY-ST-ZIP LONGWOOD FL 32779 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.