## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S09043

(8)

HIGHLAND OCEAN TECHNOLOGY, INC.

Principal Place of Business Mailing Address 253 NE 32ND CT. 253 NE 32ND CFT. LAUDERDALE FL 33334-1137 FT. LAUDERDA						DO NOT WRITE IN THIS SPACE				
					3	Date Incorporated or Qualified 10/23/1990	i			
	lace of Business	2a. Mailing Address	<u></u>	·	4	I. FEI Number		<i>i</i>	pplied For	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				S8 75 Addition			ot Applicable Additional	
22		27				. Certificate of Status Desired	<u></u>	<del></del>	equired	
City & State	е	City & State			6	Lection Campaign Financing Trust Fund Contribution		• •	May Be to Fees	
Zip	Country	7ip 7	Cou	ntry	8	. This corporation owes or has p		rent year Int	tangible	
24	25 Name and Address of Current	t Registered Agent	30		10	Personal Property Tax due Jur Name and Address of New F			No	
KII	STON, TODD W.			81 Name		,	- 3			
8211 W BROWARD BLD. SUITE 375 PLANTATION FL 33324			[	82 Street .	Address (	P.O. Box Number is Not Accept	able)			
				84 City			FL	85 Zip (	Code	
1 office or r	to the provisions of Sections 607.0502 agistered agent, or both, in the State in familiar with, and accept the obligation for the provision of the state of the	of Florida, Such chan <b>ge was</b> itions of, Section 607.0505, F	authorized lorida State	by the corr	rporation's	board of directors. I hereby acc	purpose of ept the app	changing it pintment as	s registered registered	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF	ICERS AND			
TITLE	D AND ENGLINE AND DE	☐ DELETE	1.1 TiT					Change	Addition	
NAME	VILLENEUVE, ANDRE 5350 NE 17 TERRACE		1.2 NA							
STREET ADDRESS	FT. LAUDERDALE FL		•	REET ADDRESS						
CITY-ST-ZIP TITLE	D	DELETE	2.1 TiT	Y-ST-ZIP	<del> </del>			Change	Addition	
NAME	HANSEN, NORMAN		2 2 NA		1			onlings		
STREET ADDRESS	4215 S OCEAN BLVD., #7			REET ADDRESS						
CITY-ST-ZIP	HIGHLAND BCH. FL		2.4 CI	TY-ST-ZIP						
TITLE	,	DELETE	3.1 111	LE	1			Change	☐ Addition	
NAME			3.2 NA	ME	1					
STREET ADDRESS			3.3 ST	REET ADDRESS						
CITY-ST-ZIP				IY-ST-ZIP	<del> </del>			<u> </u>		
TITLE		☐ DEL <b>et</b> e	4.1 TIT					☐ Change	Addition	
NAME			4. 2 NA		)					
STREET ADDRESS				KEET ADDRESS						
CITY-ST-ZIP		DELETE	4.4 CH 5.1 TIT	Y-ST-ZIP	<del> </del>			Change	Addition	
NAME		occur	5.1 III 5.2 NA	i	1			CT ORDING		
STREET ADDRESS				REET ADORESS						
CITY-ST-ZIP			- 1	Y-ST-ZIP	1					
TITLE		DELETE	6.1 TiT		<del> </del>			Change	Addition	
NAME		—	6.2 NA		}					
STREET ADDRESS				EET ADDRESS						
CITY-ST-ZIP				Y - S1 - ZIP						
14. I hereby o	erify that the information supplied wit	th this filing does not qualify			ed in Secti	ion 119.07(3)(i), Florida Statutes.	I further ce	rtify 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 chapter 607 an an attachmorphwith an adoptes.

**FILED** 

May 04 1998 8:00am

Secretary of State