

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S50300 (0)

1. Corporation Name

SCOTT OCEAN LEASING, INCORPORATED



Principal Place of Business

1000 E 56TH STREET
HALEAH FL 33013
US

Mailing Address

1000 E 56TH STREET
HALEAH FL 33013
US

3. Date Incorporated or Qualified
05/02/1991

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0262807

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 2801 S.W. 140 TER.

2a. Mailing Address

26 2801 S.W. 140 TER.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 DAVIE FLORIDA

27 City & State

28 DAVIE FLORIDA

24 Zip 33330

25 Country BROWARD

29 Zip 33330

30 Country BROWARD

9. Name and Address of Current Registered Agent

SCOTT, TIM
2801 SW 140TH TERR
DAVIE FL 33330

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME SCOTT, TIM
STREET ADDRESS 2801 SW 140TH TERR
CITY - ST - ZIP DAVIE FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME SCOTT, JEFF
1.3 STREET ADDRESS 1077 N.E. 98 St.
1.4 CITY - ST - ZIP MIAMI SHORES, FLORIDA 33138

☐ Change ☒ Addition

2.1 TITLE DV
2.2 NAME SCOTT, TIM
2.3 STREET ADDRESS 2801 S.W. 140 TER
2.4 CITY - ST - ZIP DAVIE FLORIDA 33330

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

T. Scott

Tim Scott

3/31/96

(954) 424-1366

CR2E034 (12/95)