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

SIGNATURE:

PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Katherine Harris 90 JUL 13 FN 1:21 ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS IN LARAGSEE, FLORIDA DOCUMENT # S53885 1. Corporation Name SEA SPORTS & SCUBA, INC. Principal Place of Business Mailing Address 3663 MCKINLEY AVE 3663 MCKINLEY AVE FT MYERS FL 33901 FT MYERS FL 33901 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/14/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0248282 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country Country 30 24 29 Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THORN, JOHN E. 82 Street Address (P.O. Box Number is Not Acceptable) 3663 MCKINLEY AVE FT MYERS FL 33901 83 Zip Code 85 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 red Agent signature required when registating. (11/98) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1 1 TITLE Change ☐ Addition THORN, JOHN E. NAME 1.2 NAME CR2E034 3663 MCKINLEY AVE STREET ADDRESS 13 STREET ADDRESS FT MYERS FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Decete 07/23/99~-010Rage. TJAddition TITLE 21 TITLE THORN, ANN K. NAME 22 NAME ****150.00 ****150.00 3663 MCKINLEY AVE STREET ADORESS 2.3 STREET ADDRESS FT MYERS FL CITY-ST-ZIP 2 4 CITY-ST-ZIP [] DELETE TITLE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34. CitY-ST-ZIP DELETE TITLE 4.1 TITLE [] Change ■ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIF DELETE TITLE 5.1 TITLE [] Change ■ Addition 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 61 TITLE I DELETE TITLE [] Change [] Addition 6 2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-21P Thereby 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 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, are 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 and Block 12 or Block 13 if changed, syon attachment with an address, with all other like empowered.

JOHN E. THORN 3663 MCKINLEY AVE. FT. MYERS, FL 33901

June 23, 1999

Annual Reports Filings
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re:

SEA SPORTS & SCUBA, INC.

FEI NO. 65-02488282

Dear Sir or Madam:

Enclosed please find the Annual Report for the above corporation together with the requisite filing fee. Although I understand this Annual Report is being filed after the due date, I would like to inform you that I have been extremely ill and was not able to file the Annual Report on time. I respectfully request that any penalties not be assessed because of my health status. If any more information is needed, I will be happy to provide it.

Thanking you in advance for your cooperation and understanding.

Very truly yours,

Enclosures