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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE:

V08282

(8)

SCUBA CORP.

Secretary of State

FILED

Apr 24 1998 8:00am

DO NOT WRITE IN THIS	SPACE

6								
Principal Place of Business 5147 CASTELLO DRIVE NAPLES FL 34103 US		Mailing Address	5147 CASTELLO DRIVE		1 (60) 6 (10) 6 (10) 100) (6) 12 (10) 400			
		NAPLES FL 34103 US	NAPLES FL 34103			DO NOT WRITE IN THIS SPACE		
US		US				3. Date Incorporated or Qualified		
						01/21/1992		
2. Principal Pla	ace of Business	2a. Mailing Address	\$	·		4. FEI Number	Ap	plied For
21		26				65-0310748		t Applicable
Suite, Apt #	i, etc.	Suite, Apt. #, et	tc.			5. Certificate of Status Desired	\$8.75	
22		27					Fee Re	<u> </u>
City & State	i e	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added 1	
23	Country	26 Zip		Country		Trust Fund Contribution This corporation owes or has paid the current of the current o		
Zip 24	<u>⊢</u> ¬ ′	29	30	SOUTHING .				No
24	25 25 Name and Address of Curre		[30]	ſ		10. Name and Address of New Registered A		
DID	ENEDETTO, ROBERT P.			81	Name			
	7 CASTELLO DRIVE			100	C1	dress (P.O. Box Number is Not Acceptable)		
	PLES FL 34103			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
100	LES 1 L 34103			83				
					O't-		lee Zin /	Code
				84	City	FL	85 Zip (Code
11. Pursuant to	o the provisions of Sections 607.05	502 and 607.1508, Florida	Statutes, the	e above	-named cor	rporation submits this statement for the purpose of c	hanging it	ts registered
office or re	egistered agent, or both, in the State	te of Florida. Such change inations of Section 607.05	e was authori 505 - Florida S	rized by Statutes	the corpora	ation's board of directors. I hereby accept the appoi	ntment as	registered
	Trigitinal Willi, and accept the con	ganona bi, otionon con .co	, , , , , , , , , , , , , , , , , , ,	Diaidioo	•			
SIGNATURE 5	Signature, typied or printed name of registered a	agent and title it applicable	(NOTE Regis	stered Ager	nt signature requ	uired when reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	1	13.		ADDITION OF THE OFFICE OF AND A	DIDEATAG	RS IN 12
				13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	DPS	☐ DELE		I TITLE			Change	
	DPS BRUGGLER, JOSEF		TE 1.					
TITLE		☐ DELE	TE 1.	1 TITLE	ADDRESS			
TITLE NAME	BRUGGLER, JOSEF	☐ DELE	1. 1. 1.	.1 TITLE			Change	Addition
TITLE NAME STREET ADDRESS	BRUGGLER, JOSEF RAINER STREET 23A, A-531	☐ DELE	TE 1. 1. 1.	1.1 TITLE 1.2 NAME 1.3 STREET				Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRUGGLER, JOSEF RAINER STREET 23A, A-531	IO MONDSEE	TE 1. 1. 1. 1. TE 2.	I.1 TITLE I.2 NAME I.3 STREET A			Change	Addition
TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE	BRUGGLER, JOSEF RAINER STREET 23A, A-531 AUSTRIA FL T	DELE O MONDSEE	TE 1. 1. 1. 1. 1. TE 2. 2.	1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST 2.1 TITLE	T- 21P		Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	BRUGGLER, JOSEF RAINER STREET 23A, A-531 AUSTRIA FL T BRUGGLER, JOSEF RAINER, STREET 32A, A-531	DELE O MONDSEE	TE 1. 1. 1. 1. 1. 1. 2. 2. 2.	1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET	T-ZIP ADDRESS		Change	Addition
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