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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V11788

(9)

SEAWOLF INDUSTRIES, INC.

FILED Apr 28 1997 8:00am Secretary of State

								Ħ
		Ш		Ш		IIII	Ш	

Principal Plac	ce of Business	Mailing Address) 1881/1 0/100/ 1100/ 1181/ 1884/ 1880/ 101/ 1181/ 1181/ 1181/ 1181/ 1181/ 1181/ 1181/ 1181/ 1181/				
1426 BEACON NEW SMYRNA	STREET BEACH FL 32169	1426 BEACON STREET NEW SMYRNA BEACH FL 3	3 2169-2218					
				3. Date Incorporated or Qualified 02/03/1992	3a. Dale of Last Report 04/30/1996			
,	Place of Business	2a, Mailing Address		4. FEI Number	Applied For			
Suite, Apt	# alo	Suite, Apt. #, etc.		59-3125038 Not Appli				
22	·	27 Suite, April #, etc.	,a	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Sta	te	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	[28]	Country	Trust Fund Contribution				
24	25	ê ` }	30	This corporation has liability for in Florida Statutes	Yangible tax under s 199.032, Yes \[\] No			
	9, Name and Address of Currer			10. Name and Address of New Reg				
152 ORM	DIT, ROBERT H., JR WEST GRANADA BLVD. MOND BEACH FL 32174		83 84 City	dress (P.O. Box Number is Not Acceptabl	FL 85 Zip Code			
11. Pursuant office or agent, I	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607,1508, Florida Statute of Florida Such change was a ations of, Section 607,0505, Flo	es, the above-named con outhorized by the corpora irida Statules.	poration submits this statement for the particular portion's board of directors. I hereby acceptions	urpose of changing its registered t the appointment as registered			
SIGNATURE	Signature, typod or printed name of registered agr	out and title if applicable (NOT)	Bigistered Agent's grature req.	uired when reinstating)	DAIL			
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC				
TITLE	D	DELETE	1.1 101.6		Change Addition			
NAME	UNGER, LUCIA F.		1.2 NAME					
STREET ADORESS	1		1.3 STHEET ADDRESS	* *				
CITY+ST-ZIP	NEW SMYRNA BEACH FL	DELETE	1.4 CiTY-ST-ZIP		Change Addition			
TITLE	1		2.1 HILL	11. g	Change Addition			
NAME Street adoress			2.2 NAME					
CITY-ST-ZIP			2.3 STREET ADDRESS 2.4 CCY-ST-ZIP					
TITLE		DELETE	3.1 1114		Change Addition			
NAME		-	3 2 NAME					
STREET ADDRESS	!		3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY - ST- ZIP	. •				
TITLE		☐ DELF1E	4.1 TITLE		Change Addition			
NAME			4.2 NAME					
STREET ADORESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY-\$1-7IP					
TITLE		☐ DELETE	5.1 TITLE		Change Addition			
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5 4 CITY+ST+ZIP					
TITLE		DELETE	6.1 1t ^a l E		Change Addition			
NAME			6.2 NAME					
STREET ADDRESS			6.9 STREET ADDRESS					
CITY_ST_7ID			6 A CITY C1 7(6)					

14. (do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), 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 23 if changed, or our an attachment with an address