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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V2368

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S.E. DIVING CORP.

FILED
Jan 29 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address											† F									H
199 N. FEDERAL HIGHWAY DEERPIELD BEACH FL 33441 US 199 N. FEDERAL HIGHWAY DEERFIELD BEACH FL 33441 US US																				
												3, Date Incorporated or Qualified 3a, Date of Last Rep 03/25/1992 09/11/1996							epor	l
2. Principal Place of Business					2a. Mailing Address							Numb		_				Ap	plie	d For
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City & State				28	City & State						i			gn Finan ribution	ncing			5.00 Added t		
24	Zip	Country 25			Z ip Countr 29 30					8. This corporation has liability for intangible tax u Florida Statutes Yes No										
		g, Name	and Address of Currer	t Regi							10. Na	me an	d Add	ress of I	New Re	gistered	Agen	ł		
	DAP	UZZO, STI	even					81	Nan	1e										
			AL HIGHWAY EACH FL 33441		82 Street Addr						ess (P.O.	Box N	umber	is Not A	cceptat	ole)				
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									City							FL 85 Zip Code				•
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 regist office or registered agent, or both, in the State of Florida. Slich change was authorized by the corporation's board of directors. I hereby accept the appointment as register 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 it graphicable (NOTE Begistered Agent signature required when reinstaling) DATE.												stered								
12		Signature, typod	or printed name of registered agr OFFICERS AN			(NOTE	13.	a Age	n: signa	eure require			S/CHAI	NGES TO	O DEFIC	DATE CERS AN	וח חופו	CIOE	INI 28	12
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14. I do hereby 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 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

6.3 STREET ADDRESS

CICNIATURE.

STREET ADDRESS

CITY-ST-ZIP

1/20/97