SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

SEGUTRONIC INTERNATIONAL INC.

(5)

FILED Sep 30 1998 8:00am Secretary of State



Principal Place		Mailing Address		* (22)911 911 9120 11220 1121 121 121 121	· কাৰ্য কাৰণ কৰেণ কৰেণ বৰণ 145°
815 NW 57TH AVE		815 NW 57TH AVE			
SUITE 406 MIAMI FL 33126 US		SUITE 406 Miami Fl 33126		DO NOT WRITE IN THIS SPACE	
		US		3. Date Incorporated or Qualified	
				10/26/1988	
	ace of Business	2a. Mailing Address	C43. GL	4. FEI Number	Applied For
	N.W. 66th St.	26 8406 N.W. 60	oth St.	65-0080223	Not Applicable \$8.75 Additional
Suite, Apt.	#, etc.	Suite, Apl. #, etc.		5. Certificate of Status Desired	Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Miami FL		28 Miami FL		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible
24 33166	525	1=-1	30 US	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
GAMERO, CARLOS			81 Name Same		
	NW 57TH AVENUE		82 Street Add	ress (P.O. Box Number is Not Acceptable) N.W. 66th St.	
	E 406		83	N.W. both St.	
MIAN	AI FL 33126				
]			84 City Miam	į F	85 Zip Code
11 Durayant	to the provisions of sections 607 0502	and 607 1508 Florida Statutes	s the shove-named corne	oration submits this statement for the purpose of	changing its registered
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 algenture required when reinstating) DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PSD	DELETE	1,1 TITLE		Change Addition
NAME	GAMERO, CARLOS		1.2 NAME		
STREET ADDRESS	815 NW 57TH AVE STE 406		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		Change Addition
TITLE		L DELETE	4.1 TITLE 4.2 NAME		Change Addition
NAME			4.2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS			4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		Change Addition
NAME		□ pere ic	5.2 NAME		- 4.00.80 (-) version
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		٠	6.2 NAME		, –
STREET ADDRESS			6.3 STREET ADDRESS		:
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
	artify that the information supplied with t	his filing does not qualify for th		ection 119.07(3)(i). Florida Statutes, I further certi	fy that the information

I hereby certify that the information supplied with this filling does not quality for the exemption stated in section. Fig. 1970 (3)(7), Fiducial states in exemption states in declarate the information indicated on this annual report or suppliemental 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.

9/22/88

305/463-855/