## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L0000001822

SERVICES EXPORT IMPORT (SEI), L.C.



**FILED** Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90071 028 \*\*\*\*50.00

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		Mailing Address 517 AVENUE B MELBOURNE BEACH FL 32951			·				
2 Principal Pl	ace of Business	3. Mailing Address							
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Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State		4. FEI Numbe	59-363049	3	<del></del>	pplied For ot Applicable	
Zip	Country Zip Coun				5. Certificate	of Status Desired		\$5.00 Add Fee Require	
	6. Name and Address of Current	Registered Agent			_7. Name and	Address of New R	egistered /	igent	
LAW OFFICES OF DOUGLAS JOVANOVIC, P.A.				Name					
17 S	OUTHEAST 24TH AVE. IPANO BEACH FL 33062	•			P.O. Box Numbe	er is Not Acceptable	:)		
			City	<del></del> _			FL	Zip Cod	de
9. The above	named entity submits this statement fo	r the purpose of changing its	registered office	or register	ad agent or het	h in the State of Ele		amiliar with	and accept
	ons of registered agent.	r the purpose of changing its	registered office	or register	ed agent, or both	n, in the state of Fig.	mua. ram	anıllai Willi,	and accept
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	E: Registered Agent sign	nature required	when reinstating)	<del> </del>	DATE		_ <del>_</del> _
<del></del>								<del></del>	
FILE NOW!!! FEE IS \$50.00  Make Check Payable to Florida Department of State								ļ	
		,	e By May 1, 20	-	IR OF State				İ
9.	MANAGING MEMBE		10.			ADDITIONS/	CHANCES		
TITLE :	MEM	Delete	TITLE	<del></del>		AUDITIONS	CHANGES	Change	Addition
NAME	PETIT, PIERRE	D Délete	NAME					C onlange	
STREET ADDRESS	517 AVENUE B		STREET ADDRESS	3		•			[
CITY-SI-ZIP	MELBOURNE BEACH FL 32951		CITY-ST-ZIP						
TITLE	MEM	☐ Delete	TITLE					☐ Change	Addition
NAME	SOLLOWAY, BEATRICE		NAME						
STREET ADDRESS CITY-ST-ZIP	517 AVENUE B MELBOURNE BEACH FL 32951		STREET ADDRESS CITY-ST-ZIP	,					
TITLE	MELBOURNE BEACH FL 32931	□ Delete	TITLE	<del> </del> -			<del>.</del> .,	☐ Change	Addition
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<ol> <li>11. Thereby c</li> </ol>	ertify that the information supplied with	this filing does not qualify for	r ine exemption s	rated in Se	ction 119.07(3)(	n. Fiorida Statutes.	i turrher cer	ary that the i	digrmation

Indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.