


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 08, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000104506  
 1. Entity Name  
 SEGER INTERNATIONAL COMPANY, INC.



Principal Place of Business 141 N.E. 3RD AVE. SUITE 406 MIAMI, FL 33132	Mailing Address 141 N.E. 3RD AVE. SUITE 406 MIAMI, FL 33132
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02052004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

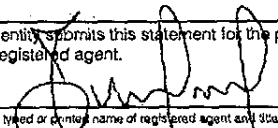
4. FEI Number 52-2380250	Applied For Not Applicable
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5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 RAMOS, JOSE R  
 141 N.E. 3RD AVE.  
 SUITE 406  
 MIAMI, FL 33132

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: 02-05-04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

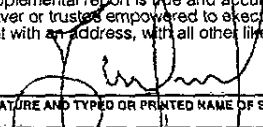
U00000081422  
 03/08/04-80149-014 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD RAMOS, JOSE R 141 N.E. 3RD AVE. MIAMI, FL 33132
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: 02-05-04 (305) 7942017  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phone #