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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

SEALAMEDA INC.

(7)

## **FILED** Apr 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								1 10311031 101 11911 01001 11111 01001 1111	*** 31261 91811 81	Lis minsi	1 31011 1831
					TH BUENA VISTA STREET						
SUITE 380 ORLANDO FL 32821				BURBANK CA 91521-0586 US				DO NOT WRITE IN THIS SPACE			
US				•				3. Date Incorporated or Qualified	11110 01 1102		<u>_</u>
								05/07/1987			
2. Principal Place of Business				2a, Mailing Address				4. FEI Number Applied Fo			plied For
21				26				59-2794368	Not Applicable		
Suite, Apt. #, etc.				Suite, Apt #, etc				5. Certificate of Status Desired			Additional
City & State				City & State					<del></del>		quired
23				<del> </del>				6. Election Campaign Financing Trust Fund Contribution	¬ '		May Be
Zip Country			28	Zip Country			·				o Fees
24	25			30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
g. Name and Address of Current								10. Name and Address of New Registered Agent			
	ank s. Iopi					81	Name				
1375 <b>B</b> UENA VISTA DRIVE							Street Add	reet Address (P.O. Box Number is Not Acceptable)			
4TH FLOOR NORTH LAKE BUENA VISTA FL 32830											
LA!	(F ROFNY	VISTA FL 32830				83					
						84	City		85	Zip (	Code
44 Purcuent	to the provini	one of Sections COZ OF	.ດ້າ ຄຸ້ນໄດ້ຕ	7 1500 Florido <b>C</b> t	otutos the a		s possed oo	rporation submits this statement for the purp	FL  °°	nin n it	
office or r agent. La	egi <b>ste</b> red age m <b>fam</b> iliar wit	ent, or both, in the Sta h, and accept the obli	le of Florid gations of,	a. Such change w Section 607.0505	atutes, trie at vas authorized 5, Florida Stat	d by utes	e-named cor y the corpora s.	sporation submits this statement for the purple ation's board of directors. I hereby accept the	e appointme	int as	registered registered
SIGNATURE											
12,	Signature, typed o	or printed name of registered a OFFICERS A			(NOTE Registered	i Age	ent signature requ	uired when reinstating) C ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTOR	Q INI 12
TITLE	PO			DELETE		ILE		ADDITIONS/CHANGES TO OFFICER		ange	Addition
NAME	THOMPS	ON, DAVID K.			1.2 NA				_	Ü	
STREET ADDRESS 500 S. BUENA VISTA ST.				1.3 STREET A			F ADDRESS				
CITY-ST-ZIP	BURBAN	K CA			1.4 CI	1Y-S	S1-ZIP 9	1521			
TITLE	20	AMAILL		☐ DELETÉ	2.1 TO	ΓLF			☐ Ch	ange	Addition
NAME		ARSHA L.		•	2.2 NA	ME					
STREET ADDRESS	BURBAN	UENA VISTA ST.			2.3 ST	REET	ADDRESS				
CITY-ST-ZIP	DUNDAN	N UA		T NO STE			ST-ZIP 9	1521			
TITLE	•	JUDSON C.		☐ DELETE	3.1 711				L Ch	ange	Addition
NAME CZOSCZ ADDOSCC		UENA VISTA ST			3.2 NA		ADDDECO				
STREET ADDRESS	BURBAN						ADDRESS	, 1521			
CITY-ST-ZIP TITLE	0			DELETE	3.4. U 4.1 TI		ST-ZIP 9	1751	☐ Ch	ange	x Addition
NAME	WILLIAM	S, MARK S			4.2 N				U.,		
STREET ADDRESS	<b>50</b> 0 S. B	UENA VISTA ST					ADDRESS				
CITY-ST-ZIP	BURBAN	K CA					1	1521			
TITLE	VT		·	DELETE	51 T)				Ch	ange	X Addition
NAME		ER, ANNE L.			5 2 NA	ME					
STREET ADDRESS		JENA VISTA ST			5 3 ST	REET	ADDRESS				
CITY-ST-ZIP	BURBAN	K CA		· ···			ST-ZIP 9	1521			
TITLE				☐ DELETE	61111				☐ Ch	an <b>g</b> e	Addition
NAME	ŧ.				6.2 NA						
STREET ADDRESS	*				63 ST	AEET	ADDRESS				į

14. I 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.