

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State
 05-29-2002 90708 009 ***150.00

0346931 AV

DOCUMENT # P93000064043

1. Entity Name
SEVEN SEAS MANAGEMENT, INC.

Principal Place of Business
 10225 NW 33RD STREET
 SUNRISE FL 33351
 US

Mailing Address
 10225 NW 33 STREET
 SUNRISE FL 33351
 US

UNIFORM



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 2183 N. POWERLINE RD

3. Mailing Address
 2183 N. POWERLINE RD

Suite, Apt. #, etc.
 SUITE 2

Suite, Apt. #, etc.
 SUITE 2

City & State
 POMPAÑO BEACH, FL

City & State
 POMPAÑO BEACH, FL

Zip
 33069

Country
 BROWARD

Zip
 33069

Country
 BROWARD

4. FEI Number 65-0435686

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMOLLER, BRUCE
 100 SE 2ND ST.
 STE #2620
 MIAMI FL 33131

Name
 BENZAKEN, MEIR

Street Address (P.O. Box Number is Not Acceptable)

20600 NE 22 PLACE

City
 NORTH MIAMI BEACH

FL

Zip Code
 33180

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.

SIGNATURE

MEIR BENZAKEN, PRESIDENT

05/13/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DPS
 BENZAKEN, ASSI
 1950 SOUTH OCEAN DR, #9-F
 HALLANDALE FL ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DVT
 BENZALEEN, MEIR
 3610 YACHT CLUB DR, #1203
 AVENTURA FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 DPS ☐ Change ☐ Addition

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 MEIR BENZAKEN, PRESIDENT 05/13/02 951 7460577

Date

Daytime Phone #

CR2E034 (9/01)