FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

P95000066124 (5)

DOCUMENT #

SEA TO SEA ENTERTAINMENT AGENCY, INC.

Principal Place of Business								
19800	SW	180TH	AVE	#8				

Mailing Address

19800 SW 180TH AVE., #8



MIAMI FL 3	3187	MIAMI FL 33187			
					3. Date Incorporated or Qualified 3a. Date of Last Report 08/24/1995
2. Principal Pla	ace of Business	2a. Mailing Address 26			4. FEI Number Applied For 65 - 060 7444 Not Applied For Not Applied For
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
Zip 24	Country 25	Z _i p	Countr	у	R. This corporation has liability for intangible tax under s 199,032, Florida Statutes Yes \[\int \text{No} \]
	9. Name and Address of Current		1301		10. Name and Address of New Registered Agent
			8	1 Name	10. Hame and Address of from Hegistered Agent
DALE,	MARGARET W				
19800	SW 180TH AVE., #8		82	2 Street Addre	ess (P.O. Box Number is Not Acceptable)
MIAMI I	FL 33187		8:	3	
•					
			84	City	85 Zip Code
SIGNATURE	h, and accept the obligations of, Sections	1007.0005, Florida Statilles	•	poration's board	audit submits this statement for the purpose of changing its registered office do directors. I hereby accept the appointment as registered agent. I am
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1 1 TIFLE		Change Addition
NAME	DALE, GERALD D		1.2 NAME		<u></u>
STREET ADDRESS	19800 SW 180TH AVE., #8		1.3 STHEE	T ADDRESS	
CITY - ST - ZIP	MIAMI FL 33187		14 CHY-	ST-ZIP	
TITLE	0	☐ DELETE	2 1 THLE		Change Addition
NAME	DALE, MARGARET W		2.2 NAME		
STREET ADDRESS	19800 SW 180TH AVE., #8		23 STREE	F ADDRESS	
CITY-ST-ZIP	MIAMI FL 33187		2 4 CITY -	S1-ZIP	
TITLE	DINADOO CVAITURA A	DELETE	3 1 TiTLE		Change Addition
NAME	DINARDO, CYNTHIA A		3.2 NAME		
STREET ADDRESS	19800 SW 180TH AVE., #8 MIAMI FL 33187		3 3 STREE	ET ADDRESS	
CITY-ST-ZIP	D MINMI FE 22101		3.4 CITY -	ST - ZiF	
TITLE	BARE, CESAR	□ DELETE	4 1 TITLE		Change Addition
NAME	19800 SW 180TH AVE., #8		4.2 NAME		
STREET ADDRESS	MIAMI FL 33187		43 STREE	I ADDRESS	
CITY - ST - ZIP	WINTE 1 F 00 101		4.4 C!TY -:	ST - ZiP	
TITLE		DELETE	5 1 TiTLE		Change Addition
NAME AVOICE LODDSOO			5.2 NAME		
STREET ADDRESS			5.3 STREE	LADDRESS	
CITY-ST-ZIP		FT bricks	5 4 CITY -	ST-21P	
TITLE		☐ DELETE	6 1 TITLE		
NAME			6.2 NAME		800001784718 -04/18/9601005034
STREET ADDRESS				ADDRESS	***200.00
CITY-ST-ZIP			64 CITY-5	ST - ZIP	<u> </u>

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 that the empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 or Block 13 if changed, or on an attachment without address.

SIGNATURE:

E: SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-254-2064 Daylora Prone 1