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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000026474 (1)

SEEMA EQUIPMENT CORPORATION

Principal Place of Business Mailing Address						1 100/100/ 110 (101/) 100/) Equit quit quit quit quit 101/0 divit qibit 100/) 100/
7109 NW 11' SUITE A GAINSEVILLE	-	7109 NW 11TH PLACE SUITE A GAINSEVILLE FL 32805			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified
6 Dringlog C	Place of Business	2a. Mailing Address				04/01/1997 4. FEI Number Applied For
2. Filincipari	-IdOd Of DUSINESS	26			59-3441878 Not Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		City & State			Fee Required	
City & Stel	te	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		7(p				8. This corporation owes or has paid the current year totangible
24	25		30			Personal Property Tax due June 30. Yes XINo
	9. Name and Address of Curre	nt Registered Agent	81	1		10. Name and Address of New Registered Agent
DOWNEY, KEVIN I				l N	lame	
	IST NW 41ST STREET		82	S	treet Addr	ress (P.O. Box Number is Not Acceptable)
	Jite B-2 Ainseville Fl 32 6 08		83	+		
~	WINDE ILL OFFICE		84	1	ity	85 Zip Code
				-		FL []
Office or	registered agent, or both, in the State	e of Florida. Such change was at	uthorized b	v the	amed corp e corporat	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
i	am familiar with, and accept the oblig	ations of, Section 607.0505, Fior	ida Statule	15.		
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable {NOTE	Registered Ag	orit si	gnature requi	rred when romstating) DATE
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	0	DELETE	1.1 THEE			Change Addition
NAME	QAIYUMI, SHAHEDA	A	1.2 NAME			
STREET ADDRESS	7109 NW 11TH PLACE, STE GAINSEVILLE FL 32605	n	1.3 STREE			
CITY-ST-ZIP TITLE	GRANDLY ILL I L DEDOU	DELETE	1.4 CITY-3 2.1 TITLE	51-21	-	Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	I ADD	RESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		IP	
TITLE		[_] DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME		Dr.ce	
STREET ADDRESS			3.3 STREE 3.4. CITY-			
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		.11	Change Addition
NAME.			4. 2 NAME			,
STREET ADDRESS			4.3 STREE	T ADD	RESS	
CITY-ST-ZIP			4.4 CITY - 3	ST-ZI	P	
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME		NDE DE	
STREET ADDRESS			5.3 STREET		· · ·	
CITY-ST-ZIP TITLE	DE 0575		6.1 TITLE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADD	RESS	
CITY-ST-ZIP			6.4 C(TY -)	\$1 - ZI	Р	
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.						