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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K52520

(9)

1. Corporation Name
SEIB SEA PRODUCTS, INC.



Principal Place of Business

Mailing Address

1120 S. BREVARD AVE
~~378 GURACAO DRIVE~~
COCOA BEACH FL 32931
US

C/O DONALD M. SEIB
1120 S. BREVARD AVE.
COCOA BEACH FL 32931-2412
US

3. Date Incorporated or Qualified
12/19/1988

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 1120 S. BREVARD AVE

26

4. FEI Number
59-2921970

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 N/A

27

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

City & State

City & State

23 COCOA BEACH FL

28

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

Zip

Country

Zip

Country

24 32931

25

BREVARD

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEIB, DONALD M.
1120 S. BREVARD AVE
COCOA BEACH FL 32931

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Donald M. Seib* DONALD M. SEIB

Signature type for printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
SEIB, DONALD M.
STREET ADDRESS
1120 S. BREVARD AVE.
CITY-ST-ZIP
COCOA BEACH FL

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
SEIB, NANCY A.
STREET ADDRESS
1120 S. BREVARD AVE
CITY-ST-ZIP
COCOA BEACH FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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.

SIGNATURE:

Donald M. Seib
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0102800

CR2E034 (9/96)