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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700082461

SEDUCTIVE VIRTUS, INC.

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90070 033 ***150.00



	·	Mailing Address			46 (87)) (8 4)) 10 (() 6 0)		4110 E DIBIO L		
Principal Place	e of Business								
850 N.W. 89TH AVENUE 850 N.W. 89TH AVENUE									
PLANTATION FI	L 33324	PLANTATION FL 33324			DO NOT WRITE IN THIS SPACE				
				3. Date Incorpor	3. Date Incorporated or Qualifed				l
				09/22/199					l
2 Dringing D	nce of Business	2a. Mailing Address					App	lied For	
2. Principal Place of Business 13 SU2 SW 2W0 ST		26 SAME		65-0810764			<u> </u>	Applicable	ĺ
Suite, Apt, #, etc.		Suite, Apt. #, etc.					\$8.75 Ad		ĺ
THE A		27		5. Certifcate of S	Status Desired		Fee Req		
City & State		City & State		6. Election Cam	naign Financing		\$5.00 N	vav Be	=
3 FT. LAUDELOGIE FL		28		Trust Fund Co	_	Ш	Added to		1
ZipCountry		Zip Country		8. This corporati	on owes the curre	ent year Inta	ingible		l
77 7 7	12 25 Bravars	29 30	29 30		erty Tax.	•		Z No	
	9. Name and Address of Current		·	10. Name and A	ddress of New R	egistered A	Agent		
			81 Name	TRUPCE	Raula	1110			l
ROW	/LAND, DESIREE		82 Street Ad	INSIPEE	er is Not Accepta				1
850 N.W. 89TH AVENUE			July Sileer Ac	1425W 2	UOST	5,07			
PLANTATION FL 33324			83	Hora					l
			<u> </u>	774			les Zin C	ode	1
			84 City	T. CADELL	PACE	FL	85 Zip C	272_	Ì
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes,	the above-named co	reporation eubmits this	statement for the	purpose of	changing its r	egistered	1
office or r	to the provisions of Sections 607.0502 egistered agant, or both in the State of m familiar with, and accept the obligations.	of Florida, Such thange was auth	orized by the corpora	ation's board of director	s. I hereby accep	t the appoir	itment as reg	istered	
agent. I a	m ramiliar with, and accept the obligati	das bi, section 607.0303, Florida	olalules.		•				
SIGNATURE	Signature, typed or printer came of registered agent	and title if and table. (NOTE: Rec	pistered Agent signature requ	uired when reinstating)		DATE] ;
12.	OFFICERS AN		13.	ADDITIONS/C	HANGES TO OFF	ICERS AN	D DIRECTOR	RS IN 12] }
TITLE	P00	☐ DELETE	1,1 TITLE	DESIRE PUZ SW FT. LADO	FROWL	ANN	Change	Addition	}
NAME	ROWLAND, DEISREE		1.2 NAME	The same		- 14a			;
STREET ADDRESS	850 MW 89TH AVENUE		1.3 STREET ADDRESS	PYZ SW	2100 51	77	σ) ;
CITY-ST-ZIP	PLANTATOIN FL 33324		1.4 CITY-ST-ZIP	FT. LADOR	MOALE, E	(. <u>. 33</u>	2312] 8
TITLE		☐ DELETE	2.1 TITLE				Change	Addition	۱ ۹
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			2. 4 CITY-ST-ZIP		,				ĺ
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NAME									
STREET ADDRESS			6.3 STREET ADDRESS						
CITY OT TIE	[የምላኤ)" ፣ ይገለል		6.4 CITY-SX-ZIP						1

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 suppliemental 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, with all other like impowered.

SIGNATURE:

IGNATURE AND TYPED OR TRINTED NAME OF SIGNING OFFICER OR DIRECTOR

99 954 527-386 Date Phone #