00.0.201.001	GS, FL 33065			
Current Mai	ling Address:			
11161 NW 2 CORAL SPR	6TH DR INGS, FL 33065			
FEI Number: 47-2245136		Certificate of Status Desired: No		
Name and A	ddress of Current Registered Agent:			
BEAVER PROF EDWARD F. M 290 SW 12TH A DEERFIELD BE	DSES			
The above named				
	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	orida.
SIGNATURE	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	orida. 04/07/2015
SIGNATURE		tered office or regis	tered agent, or both, in the State of Flo	
SIGNATURE	EDWARD F. MOSES Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flo	04/07/2015
	EDWARD F. MOSES Electronic Signature of Registered Agent	tered office or regis	sD	04/07/2015
Officer/Dire	EDWARD F. MOSES Electronic Signature of Registered Agent Ctor Detail :			04/07/2015
Officer/Dire	EDWARD F. MOSES Electronic Signature of Registered Agent Ctor Detail : PD	Title	SD	04/07/2015
Officer/Direc Title Name Address	EDWARD F. MOSES Electronic Signature of Registered Agent Ctor Detail : PD MOSES, EDWARD F	Title Name Address	SD MOSES, EDWARD A	04/07/2015
Officer/Direc Title Name Address	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PD MOSES, EDWARD F 11161 NW 26TH DR	Title Name Address	SD MOSES, EDWARD A 11161 NW 26TH DR	04/07/2015
Officer/Direc Title Name Address	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : PD MOSES, EDWARD F 11161 NW 26TH DR	Title Name Address	SD MOSES, EDWARD A 11161 NW 26TH DR	04/07/2015

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

PD

SIGNATURE: EDWARD F. MOSES

Electronic Signature of Signing Officer/Director Detail

04/07/2015

## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000086855

Entity Name: SESOME UNLIMITED INC.

## **Current Principal Place of Business:**

11161 NW 26TH DR CORAL SPRINGS, FL 33065

Date