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 # 380146 Corporation Name

SEVE, INC.

Principal Pla	ce of Business
72 DC W 20 ST	

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

02-13-1999 90018 022 ***150.00



Principal Place of Business	al Place of Business Mailing Address		VIII		
285 W 29 ST HIALEAH FL 33012 HIALEAH FL 33012			DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualifed 04/08/1971		
2. Principal Place of Business	2a. Mailing Address		4, FEI Number Applied For		
- · · · · · · · · · · · · · · · · · · ·	26		59-1362572 Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zip Country		ountry	8. This corporation owes the current year Intangible Personal Property Tax.		
	s of Current Registered Agent		10. Name and Address of New Registered Agent		
		81 Name			
VEGA,SEBASTIAN 830 WEST 35TH STREET HIALEAH FL 33012		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 City	FL 85 Zip Code		
AA D AA HA Island of Cooti	and 607 0502 and 607 1508. Florida Statutes, the	above-named con	poration submits this statement for the purpose of changing its registered		

Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: F	Registered Agent signature re	equired when reinstating) . DATE			
12.	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE	1.1 TITLE		Change	☐ Addition	
NAME	VEGA, SEBASTIAN		1.2 NAME				
STREET ADDRESS	830 WEST 35TH STREET		1.3 STREET ADDRESS			,	
CITY-ST-ZIP	HIALEAH FL		1.4 CITY-ST-ZIP		<u> </u>	477	
TITLE	TD	☐ DELETE	2.1 TITLE		☐ Change	Addition	
NAME	VEGA, SEBASTIAN		2.2 NAME		*	".	
STREET ADDRESS	830 WEST 35TH STREET		2.3 STREET ADDRESS				
CITY-ST-ZIP	HIALEAH FL		2. 4 CITY-ST-ZIP				
TITLE	SD.	☐ DELETE	3.1 TITLE		☐ Change	Addition	
NAME	VEGA, SEBASTIAN		3.2 NAME				
STREET ADDRESS	830 WEST 35TH STREET		3.3 STREET ADDRESS			ण होत्रत रही	
CITY-ST-ZIP	HIALEAH FL		3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE		Change	. Addition	
NAME			4. 2 NAME			•	
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS	4.5			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			C Addition	
TITLE		□ D€LETE	6,1 TTTLE		Change	Addition	
NÄME			6.2 NAME	· ·			
STREET ADDRESS		•	6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP	in Section 119.07(3)(i). Florida Statutes. I further	ertify that the in	nformation	

Interestly certify that the information supplied with this limit does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Figure 1907 the 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 cath; 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 of an attachment with an address, with all other like empowered.

SIGNATURE: