

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Apr 23 1996 8:00 am  
Secretary of State

DOCUMENT # 828651 (0)

1. Corporation Name

STEEGO CORPORATION



Principal Place of Business

Mailing Address

5114 OKEECHOBEE BLVD  
SUITE 112  
W PALM BCH FL 33417  
US

5114 OKEECHOBEE BLVD  
SUITE 112  
W PALM BCH FL 33417  
US

3. Date Incorporated or Qualified

09/14/1972

3a. Date of Last Report

04/13/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

13-1841807

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

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

UNITED STATES CORPORATION COMPANY  
1201 HAYES ST  
STE 105  
TALLAHASSEE FL 32301

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

Signature, typed or 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 VST ☐ DELETE  
NAME CURTAS, W W  
STREET ADDRESS 5114 OKEECHOBEE BLVD STE 112  
CITY-ST-ZIP WEST PALM BEACH FL

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS ☒ DELETE  
NAME O'SHEA, K J  
STREET ADDRESS 5114 OKEECHOBEE BLVD STE 112  
CITY-ST-ZIP W PALM BEACH FL

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ DELETE  
NAME SUTHERLAND, R.G.  
STREET ADDRESS 44 SEACLIFF AVENUE  
CITY-ST-ZIP TAKAPUNA NE

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☒ DELETE  
NAME NEWCOMB, J.  
STREET ADDRESS 7825 FAY AVE., SUITE 380  
CITY-ST-ZIP LA JOLLA CA

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ DELETE  
NAME HILL, T.  
STREET ADDRESS 7825 FAY AVE., SUITE 380  
CITY-ST-ZIP LA JOLLA CA

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE AS ☐ DELETE  
NAME FISHER, LINDA A  
STREET ADDRESS 250 AUSTRALIAN AVENUE, SOUTH  
CITY-ST-ZIP WEST PALM BEACH FL

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96 (407) 640-4999

Date

Daytime Phone #

CR2E034 (12/95)