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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

F93000004046 (9)

SEMCO ENTERPRISES, INC.

Principal Place of Business	
11 FLORHAM AVENUE	

SIGNATURE:

Mailing Address

SECO LIQUALISE TOAR

FILED Jan 23 1997 8:00am Secretary of State



11 FLORHAM EAST HANO\	/ER NJ 07836	MAITLAND FL 32751-40	34		
		us		3. Date Incorporated or Qualified 08/23/1993	3a. Date of Last Report 02/07/1996
2. Principal Pla	ice of Business	2a. Mailing Address	.117	4. FEI Number	Applied For
21		26 PD BOY		22-3169794	Not Applicable
Suite Apt. #	, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		28 WINTER	PARK FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	71p 2200	Country	8. This corporation has liability for in	
24	25	29 32 170	30 <i>USM</i>		Yes No
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Reg	jistered Agent
	DDGES, SUSAN		OI Name	·	
	08 MOHAWK TRAIL		82 Street Addr	ess (P.O. Box Number is Not Acceptab	le)
M/	AITLAND FL 32751		83 1507	RAINTREE PL	
			84 City	TO DOOL	85 Zip Code
11 Parental	the requesions of Sections 607.0	602 and 607 1508 Florida Statute	s the above harned corn	poration submits this statement for the p	urnose of changing its registered
office or re	gistered agent or both in the Sta	ste of Florida. Such change was a	uthorized by the corporat	tion's board of directors. Thereby accep	it the appointment as registered
agent Lan	ntamiliar with, and accept the ob	ligations of, Section 607 0505, Flo	nda Sialules.		
SIGNATURE :	Signer are types on printed tracer of regarders of	accent and title disciplicable (NOTE	: Registered Agent signature requir	red when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	CDP	☐ DELE1E	1.1 TITLE :		Change Addition
NAME	HODGES, SUSAN	•	1.2 NAM€		
STREET ADDRESS	2508 MOHAWK TRAIL		1.3 STREET ADDRESS	÷	
CHY-ST-7IP	MAITLAND FL		1.4 CITY-ST-ZIP	1	
THILE		☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2. 4 CITY - ST - ZIP		
THLE		DELETE:	3.1 TITLE		· Change Chaddition
MAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CI1 Y - S1 - 7)P			3.4 CITY-ST-ZIP		
TIRE		☐ 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		L DELETE	5 1 TITLE	•	Change Additio
NAME			5.2 NAME	·	
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Et Par	5.4 CITY - ST - ZIP		
TITLE		L_) DELETE	6 1 TITLE		Change Additio
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		•
CITY-S1-70	22 1 2 2	Control of the contro	6.4 CITY - S1 - ZIP		16
information I am an off appears in	y certify that the information supp i end cated on this annual report of ficer or director of the comporation i Black 12 or Block 13 if changed	incu with this ming does not qualify or sumplemental expual report is to for the receiver or thistee empty or all at attachment with an Ado	y for the exemption stated rue and accurate and that lered to execute this repo- dress.	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega rt as required by Chapter 607, Florida S	is fromer certary that the if effect as if made under oath; that the statutes; and that my name