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0502031

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **J64143**

1. Corporation Name

SEAWAY MOLD & ENGINEERING, INC.

Principal Place of Business

% PAUL BERNARD
6042 SHERWIN DRIVE
PORT RICHEY FL 34668
US

Mailing Address

% PAUL BERNARD
6042 SHERWIN DRIVE
PORT RICHEY FL 34668
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/27/1987

4. FEI Number

59-2756211

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

City & State

28

Zip Country

29

30

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BERNARD, PAUL
1117 RIDGE DRIVE
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent

81 Name

PAUL C. BERNARD

82 Street Address (P.O. Box Number is Not Acceptable)

6042 SHERWIN DRIVE

83

84 City

PORT RICHEY

FL

85 Zip Code

34668

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

X 2-15-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D BEHAYLO, LEONARD E.**
STREET ADDRESS **4650 KIFTSGATE BEND**
CITY-ST-ZIP **BLOOMFIELD HILLS MI 48302**

TITLE ☐ DELETE

NAME **D BEHAYLO, GERALD W.**
STREET ADDRESS **1850 WASHINGTON AVE**
CITY-ST-ZIP **ROCHESTER HILLS MI 48306**

TITLE ☐ DELETE

NAME **D BERNARD, PAUL C.**
STREET ADDRESS **2830 OAKRIDGE COURT**
CITY-ST-ZIP **PALM HARBOR FL 34685**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE: **X Paul C. Bernard**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

X 2-15-99

CR2E034 (1/98)