SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97; \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE; \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # K13746
1. Corporation Name
SEAAG, INC.

(8)

FILED Jul 28 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 705 - 27TH AVE., SW 705 - 27TH AVE. SW										
STE. 5 VERO BEACH		STE 5								
US			VERO BEACH FL 32988 US				3. Date Incorporated or Qualified 02/03/1988			
2. Principal Place of Business 21			2a. Mailing Address				4. FEI Number 65-0061313			plied For Applicable
Suite, Apt.	#, etc.	Suito, Apt. #. etc.				5. Certificate of Status Desired	□ \$8		dditional	
22 City & Stat		City & State						Fee Re	·	
23 City & Stat	е	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Zip Country			Zip Country			8. This corporation owes or has paid the current year Intangible			
24	25 9. Name and Address of Curren			29 30			Personal Property Tax due June 30.			
WEI	SSMAN, JOSEPH		ur Hedistelen Wde	ent	81	Name	10. Name and Address of New Het	Jisterea Agen	<u></u>	
705- 27TH AVE., SW					L					
STE	5					dress (P.O. Box Number is Not Acceptab	e)			
VER	O BEACH FL 329			83						
					84	City		FL 85	Zip C	ode
							orporation submits this statement for the pr	urpose of chan		
office or r agent. I a	registered agent, or I im familiar with, and	ooth, in the State accept the oblig	of Florida, Such o ations of, Section i	change was au 607.0505, Flor	uthorized by ida Statute:	/ the corpor 3.	ation's board of directors. I hereby accep	t the appointm	ent as r	egistered
SIGNATURE										
Signature, typed or printed name of registered age 12. OFFICERS AND					Hog stored Age	eri signatura red	juired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FRS AND DIRE	CTOR	S IN 12
TITLE	\$			DELETE	1) 10 LE		1.0011101040144140201001110		hange	Addition
NAME	BENEMANN, JO				1.2 NAME					Į.
STREET ADDRESS	343 CARAVELLE WALNUT CREEK				1.3 STREET	ADDRESS				
CITY-ST-ZIP	PDT	· UA		7	1.4 CITY - 5	T - ZIP	····	····		
TITLE	WEISSMAN, JOS	SEPH C	L	J DELETE	2.1 HILE			Ц¢	hange	Addition
NAME	705 - 27TH AVE				2.2 NAME					Í
STREET ADDRESS	VERO BEACH F				2.3 STREFT					ŀ
CITY-ST-ZIP TITLE	0			DELETE	2 4 CITY - 3 1 TITLE	51-719		Пс	hange	Addition
NAME	TILLETT, DAVID		_		3.2 NAME			۰ ت		
STREET ADDRESS	1885 - 33RD ST	•			3.3 STREET	ADDRESS				
CITY-ST-ZIP	BOULDER CO				3.4. CITY-					
TITLE		<u> </u>		DELETE	4.1 TITLE			□ C	hange	Addition
NAME					4. 2 NAME					
STREET ADDRESS					4.3 STREET	ADDRESS				
CITY-ST-ZIP					4.4 CITY - S	T-ZIP				
TITLE] DELETÉ	51 THLE	İ		<u> </u>	hange	Addition
NAME					5.2 NAME					
STREET ADDRESS					5.3 STREET					
CITY-ST-ZIP				T DEL CEC	5.4 Cily - S	1 - ZIP		·	<u> </u>	1 4420
TITLE			L] DELETÉ	6.1 1/1/16	-		□ c	hange	Addition
NAME					6.2 NAME	1000000				
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP	L				6.4 CITY- S	1 - ZIP				ľ

14. I do 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 exproration 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.