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

DOCUMENT # L51919

(3)

SEENA CORPORATION

Principal Place of Business

% JAY GELLMAN

1997

		1-

Mailing Address
% JAY GELLMAN

FILED May 02 1997 8:00am Secretary of State



SOIS N. E. 12TH TERRACE FT. LAUDERDALE FL 33334	3013 N. E. 12TH TERRA FT. LAUDERDALE FL 33						
THE STORES OF TH	, , , = , , , , , , , , , , , , , , , ,			3. Date Incorporated or Qualified 02/16/1990		of Last Report /1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For	r
21	26	·		65-0185555		Not Applica	able
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	'
City & State	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Country	Zip	Coun	ry	8. This corporation has liability for i	intangible ta	x under s. 199.032	2,
24 25	29	30			Yes 🔲		
9, Name and Address of Cur	rent Registered Agent		ZT	10. Name end Address of New Re	gistered Ag	ent	
GELLMAN, JAY		*	1 Name				
3013 N.E. 12TH TERRACE		8	2 Street A	ddress (P.O. Box Number is Not Acceptab	ile)		
FT. LAUDERDALE FL 33334		_	3				
		"	3				.
		E	4 City		FL	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0	0502 and 607 1508 Florida Stat	utos the abo	wo-parved a	porporation submits this statement for the n		anning its register	rod
office or registered agent, or both, in the St agent. I am familiar with, and accept the ob	ate of Florida. Such change was	s authorized	by the corp	oration's board of directors. I hereby accep	of the appoir	ntment as registore	ed
= '	nigations of, Section 607.0005, i	rionda Statu	es.			ı	
SIGNATURE Signature, typed or printed name of registered	agont and title it applicable (No	OTE: Registèred /	gent signature r	equired when reinstating)	DATE		
12. OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			\Box
HILE D.	☐ DELETE	1.1 TOU	F		L	Change 🔲 Addi	fition
NAME GELLMAN, JAY		. 1.2 NAM	E				ļ
STREET ADDRESS 3013 N.E. 12TH TERR		1.3 STR	ET ADDRESS				
CITY-ST-ZIP FT. LAUDERDALE FL	T ALLET		- \$1 - 7IP			100	
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NAME		5.2 NAM	E .				
STREET ADDRESS		53 STR	ET ADDRESS]
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NAME		6.2 NAV	Ė				
STREET ADDRESS	_	6.3 S1R	EET ADDRESS				}
CITY-ST-ZIP		6.4 CIT	- ST- ZIP				
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no nereby 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/leport or supplemental partial 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 or an attachment with an address.
