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SIGNATURE: BIGNATURE AND TYPED OR

Apr 15 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT # L51919** (3)SEENA CORPORATION Principal Place of Business Mailing Address % JAY GELLMAN % JAY GELLMAN 3013 N. E. 12TH TERRACE 3013 N. E. 12TH TERRACE DO NOT WRITE IN THIS SPACE FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334 3. Date Incorporated or Qualified 02/16/1990 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 65-0185555 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **GELLMAN, JAY** 3013 N.E. 12TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33334 **B3** 84 City 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 priviled name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE ☐ Change ☐ Addition GELLMAN, JAY 1.2 NAME **CR2E034** 3013 N.E. 12TH TERR STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CiTY-ST-ZIP DELETE Change Addition 7ITLE 3.1 TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change . Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change ■ Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change \_\_\_ Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CiTY+ST-ZIP 14. I hereby certify that the Information supplied indicated on this annual report or supplement officer or director of the corporation of the Block 12 or Block 13 if changed, or on an all hit/his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information at 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 eiver or trustee empoyered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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