## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT #**

L94749 🚬

1. Entity Name

SEEK SYSTEMS, INC.



Principal Place of Business

Mailing Address

2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
					1
City & State		City & State			4.
Zlp	Country	Zip	Coun	try	5. (
6. Name and Address of Current Registered Agent					7. 1

**FILED** Apr 07, 2003 8:00 am Secretary of State

04-07-2003 91043 019 \*\*\*150.00

Suite, Apt. #, etc.    City & State			
City & State  Country  So Countr			
Zip Country Zip Country S. Certificate of Status Dosired See Requires  S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name  WHITE, EDWARD W. Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not A	CHECK HERE IF MAKING CHANGES		
Country   Country   Country   Country   S. Certificate of Status Desired   \$8.75 And Fee Requires	, Applied For Not Applicable		
WHITE, EDWARD W. 938 VERSAILLES CIRCLE MATLAND FL 32751  City FL Zip Code  6. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, the obligations of registered agent.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent squature required when reinstating)    Part	itional		
WHITE, EDWARD W.  938 VERSAILLES CIRCLE MATUAND FL 32751  City  City  FL  Zip Codd  Added  Added  Added  Added  Codd  City  FL  Zip Codd  Added  Added  Added  Codd  City  FL  Zip Codd  Added  Added  Added  Codd  City  FL  Zip Codd  Added  Added  Added  Codd  Codd  Codd  City  FL  Zip Codd  Added  City  FL  Zip Codd  Added  Added  City  FL  Zip Codd  Added  Added  City  FL  Zip Codd  Added  City  FL  Zip Codd  Added  Added  City  FL  Zip Codd  Added  City  FL  Zip Codd  Added  Added  City  FL  Zip Codd  Added  City  FL  Zip Codd  Added  City  FL  Zip Codd  Added  Added  City  FL  Zip Codd  Added  City  FL  Zip Codd  Added  Added  Added  City			
938 VERSAILLES CIRCLE MATILAND FL 32751  City  FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, it the obligations of registered agent.  SIGNATURE  FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$55.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  ITILE  NAME  OFFICERS AND DIRECTORS  ITILE  MANE  SIREET ADDRESS  CITY-ST-ZIP  MATILAND FL 32751  TILE  MAME  SIREET ADDRESS  CITY-ST-ZIP  MAITLAND FL 32751  TILE  MAME  SIREET ADDRESS  CITY-ST-ZIP  MAME  MAME  SIREET ADDRESS  CITY-ST-ZIP  MAME  Change  Change	l		
MAITLAND FL 32751  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent.  SIGNATURE    Signature	P.O. Box Number is Not Acceptable)		
B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, ithe obligations of registered agent.  SIGNATURE    Signature, typed or printed name of registered agent and side if applicable.   (NOTE Registered Agent signature required when relotating)   DATE			
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, if the obligations of registered agent.  SIGNATURE    Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registered Agent signature required when reinstating)    Part			
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FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10.	and accept		
FILE NOW!!! FEE IS \$150.00     After May 1, 2003 Fee will be \$550.00     Make Check Payable to Florida Department of State  10.    OFFICERS AND DIRECTORS			
After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10.			
WHITE, EDWARD W. 938 VERSAILLES CIRCLE MAITLAND FL  VP WHITE, SUSAN H 938 VERSAILLES CIR MAITLAND FL 32751  IIILE NAME STREET ADDRESS CITY-ST-ZIP  IIILE NAME	May Be to Fees		
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WHITE, SUSAN H 938 VERSAILLES CIR MAITLAND FL 32751  Delete  TITLE NAME STREET ADDRESS CITY-ST-ZIP  NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME  TITLE NAME  TITLE NAME  TITLE NAME	☐ Addition		
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NAME NAME	Addition		
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	Addition		
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Change	Addition		

12. Thereby certify that, the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #