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

## L99175 **DOCUMENT#**

SEA	GOI	JRMET	CORPO	RATION
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20 UN	003 FOR PROF	IT CORPOR	ATION T (UBR)	May 02, 2003 8:00 at Secretary of State	m <sup>233</sup> 29
DOCUMENT # L99175  1. Entity Name				Secretary of State 05-02-2003 90400 018 ***150.00	¥
SEA GOU	JRMET CORPORATION				
Principal Place of Business 1118 NE 14TH AVENUE FT. LAUDERDALE FL 33304 US		Mailing Address 4817 NE 23RD AVE FORT LAUDERDALE FL 33308 US			
2. Principal Place of Business		3. Mailing Address			H
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
City & Sta	te	City & State		4. FEI Number 65-0213703 Applied For Not Applied	<u> </u>
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	_]
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent	
ELTON, RANDY E.			Name	,	_
1118 NE	14TH AVENUE		Street Addres	ss (P.O. Box Number is Not Acceptable)	
	ERDALE FL 33304	- '1-	<u> </u>		$\neg$
11. 6400	ETIDALE I E 30304 (	4.,			_
			City	FL   Zip Code	
	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and acce	.pt
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	E: Registered Agent signature requ	uired when reinstating) DATE	
ζ Afte	FILE NOW!!! FEE IS \$150.00 er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	of State		9. Election Campaign Financing \$5.00 May B Trust Fund Contribution.  Added to Fees	e
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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NAME	ELTON, RANDY E.	<del>-</del>	NAME	_ •	10
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CITY-ST-ZIP CITY-ST-ZIP 12. 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 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: 2

Daytime Phone #

**FILED**