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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 4:20

DOCUMENT # M25340

(4)

1. Corporation Name

S.E.J. MANAGEMENT GROUP, INC.

Principal Place of Business

C/O MARSHALL DOUGLAS PLATT
4601 SHERIDAN ST., FIFTH FLOOR
HOLLYWOOD FL 33021

Mailing Address

C/O MARSHALL DOUGLAS PLATT
4601 SHERIDAN ST., FIFTH FLOOR
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/03/1986

3a. Date of Last Report

03/16/1994

4. FEI Number

65-0174175

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

PLATT, MARSHALL DOUGLAS
4601 SHERIDAN ST.
FIFTH FLOOR
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

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 printed name of registered agent and State of application

(NOTE: Registered Agent signature required when installing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

DPT

NAME

PLATT, MARSHALL DOUGLAS

STREET ADDRESS

4601 SHERIDAN ST 5TH FL

CITY - ST - ZIP

HOLLYWOOD FL

TITLE

DVP

NAME

MELL, ALEXANDER GRAHAM

STREET ADDRESS

1351 S.W. 74TH TERRACE

CITY - ST - ZIP

PLANTATION FL

TITLE

DS

NAME

PLATT, MIRA

STREET ADDRESS

4601 SHERIDAN ST 5TH FL

CITY - ST - ZIP

HOLLYWOOD FL

TITLE

D

NAME

MELL, EILEEN

STREET ADDRESS

1351 S.W. 74TH TERRACE

CITY - ST - ZIP

PLANTATION FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marshall Douglas Platt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Reindert

1/9/95

305-963-2211
Telephone Number