

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Jun 04 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **M25340**

(4)

1. Corporation Name

**S.E.J. MANAGEMENT GROUP, INC.**



Principal Place of Business

**C/O MARSHALL DOUGLAS PLATT  
4801 SHERIDAN ST., FIFTH FLOOR  
HOLLYWOOD FL 33021**

Mailing Address

**C/O MARSHALL DOUGLAS PLATT  
4801 SHERIDAN ST., FIFTH FLOOR  
HOLLYWOOD FL 33021**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**01/03/1986**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 **3864 SHERIDAN ST.**

Suite, Apt. #, etc.

22

City & State

23 **Hollywood FL**

Zip

24 **33021**

Country

25 **BRUNDO**

2a. Mailing Address

26 **3864 SHERIDAN ST.**

Suite, Apt. #, etc.

27

City & State

28 **Hollywood, FL**

Zip

29 **33021**

Country

30 **BRUNDO**

9. Name and Address of Current Registered Agent

**PLATT, MARSHALL DOUGLAS  
4801 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)

**3864 SHERIDAN ST.**

83

84 City

**Hollywood**

FL

85 Zip Code

**33021**

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DP**  
STREET ADDRESS **PLATT, MARSHALL DOUGL**  
CITY-ST-ZIP **4801 SHERIDAN STREET, SUITE 500  
HOLLYWOOD FL**

TITLE ☐ DELETE

NAME **DPVT**  
STREET ADDRESS **MELL, ALEXANDER GRAH**  
CITY-ST-ZIP **1351 S.W. 74TH TERRACE  
PLANTATION FL**

TITLE ☐ DELETE

NAME **DS**  
STREET ADDRESS **MELL, EILEEN**  
CITY-ST-ZIP **1351 S.W. 74TH TERRACE  
PLANTATION FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

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 **3864 SHERIDAN ST.**  
1.4 CITY-ST-ZIP **Hollywood FL. 33021**

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 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

*[Signature]*

*1/2/98*

CR2E034 (10/97)