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

PROFIT CORPORATION ANNUAL REPORT

**19**98



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M90711

(6)

SEPPALA AND AHO, INC.

## FILED May 01 1998 8:00am Secretary of State



| Principal Plac  | e of Business   | Mailing Address  | Mailing Address              |   |   |                                     |
|---|---|--|------------------------------|---|---|-------------------------------------|
| 860-00EAN DR'<br>676-PH-5-<br>JUNG-BEACH FL-33408<br>US |   | 100 OCEAN DR   |                              |   |   |                                     |
|   |   | STE-PH-1-<br>JUNO BCH-FL-32408<br>US                           |                              |   | חס אוסד שפודב וגי ד   | HIR SPACE                           |
|   |   |  |                              |   | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified |                                     |
| -   |   | ••   |                              |   | 07/25/1988  |                                     |
| 2. Principal P  | Place of Business   | 2a. Mailing Address  |                              |   | 4. FEI Number   | Applied For                         |
| 21 3452 W Boynton Beach Blud 26 3452 WBoyn              |   |  | uton Be                      | each Blud   | 65-0059547  | Not Applicable                      |
| Suite, Apt.   | #. etc.   | Suite, Apt. #, etc.  |                              | ,,  |   | 60 7F                               |
| 22 Suit   |   | 27 Suite 2   |                              |   | 5. Certificate of Status Desired                              | Fee Required                        |
| City & Stat   |   | City & State   |                              |   | 6. Election Campaign Financing                                | \$5.00 May Be                       |
| 23 Boyn   | ton Beach FL  | 28 Boynton   |                              | h FL  | Trust Fund Contribution                                       | Added to Fees                       |
| Zip   | Country   | L 78 2 11 3 4  | Country                      |   | 8. This corporation owes or has paid the                      | e current year Intangible           |
| 24 55   | 136 25 05   |  | 30 U                         | ح   | Personal Property Tax due June 30.                            | Yes No                              |
|   | 9. Name and Address of Current  | Registered Agent   |                              |   | 10. Name and Address of New Registe                           | red Agent                           |
|   | H <b>ara,</b> Patrick M.  |  | 81                           | Name  |   |                                     |
| 324 DÁTURA ST   |   |  |                              | 82 Street Address (P.O. Box Number is Not Acceptable) |   |                                     |
| S-100   |   |  |                              |   |   |                                     |
| W.  | PALM BEACH FL 33401   |  | 83                           |   |   |                                     |
|   |   |  | 84                           | City  |   |                                     |
|   |   |  | 104                          | City  | ,   | FL 85 Zip Code                      |
| 11. Pursuant  | to the provisions of Sections 607,0502  | and 607.1508, Florida Statuto                                  | s, the abov                  | e-named corpo   | oration submits this statement for the purpor                 | se of changing its registered       |
| office or r   | <b>egistered agent, or both, in the State c</b><br>I <b>m familiar with, and accept the obligal</b> | if Florida. Such change was a<br>ions of Section 607,0505. Flo | uthorized by<br>rida Statute | y the corporation                                     | on's board of directors. I hereby accept the                  | appointment as registered           |
|   | and described the bisingles   | 10110 01, 00001011 001 .0000, 110                              | nau Otatoro                  | <b>.</b>  |   |                                     |
| SIGNATURE   | Stansture, typed or printed name of registered ages   | and title if applicable (NOTE                                  | Registered Ag                | ent signature require                                 | ed when reinstating) DA                                       | TE.                                 |
| 12.   | OFFICERS AND  | DIRECTORS  | 13.                          |   | ADDITIONS/CHANGES TO OFFICERS                                 | AND DIRECTORS IN 12                 |
| TITLE   | P   | ☐ DELETE   | 1.1 TOTLE                    |   |   | Change Addition                     |
| NAME  | SEPPALA, MARTIN H.  |  | 1.2 NAME                     |   |   |                                     |
| STREET ADDRESS  | 808-OCEAN DR STE-PH-1   |  | 1,3 STREET                   | ADDRESS 343   | 52 W. Boynton Beach<br>Synton Beach FL 33                     | Blv2 # 2                            |
| CITY-ST-ZIP   | JUNO BOH FL   |  | 1.4 CITY - 9                 | ST-ZIP B  | unten Beach FL 3  | 3436                                |
| TITLE   | \$  | DELETE   | 2.1 TITLE                    |   | 1   | Change Addition                     |
| NAME  | SEPPALA, NANCY  | _  | 2.2 NAME                     | }   |   | • • • • • • • • • • • • • • • • • • |
| STREET ADDRESS  | 800 OCEAN DR STE PH-1   |  |                              | ADDRESS 3 4   | 152 W. Rayston Roach R  | 1/4 # 3                             |
|   | JUNO BEACH FL   |  |                              | er zio  | 152 W. Boynton Beach B<br>Lynton Beach FL 33                  | U 2 C                               |
| CITY-ST-ZIP   | VP  | DELETE   | 2. 4 CITY-<br>3.1 TITLE      | 51-ZIF D 0  | yniun peach ru 23   | Change Addition                     |
| NAME  | SARKELA, RODNEY   |  | 3.1 MILE<br>3.2 NAME         | }   |   | California La vocitioni             |
|   | 600-GGEAN DR-GTE PH 1   |  |                              | 1 2 L   | 52 W. Boynton Beach.  | בי לייום                            |
| STREET ADDRESS  | JUNO BEACH FL-  |  |                              | ADDRESS 37  | vntan Reach FL 33   | 112C                                |
| CITY-ST-ZIP   | VP  | Criete   | 3.4 CITY-                    | SI-ZIP PO   | ynton Beach fl 33   |                                     |
| TITLE   | **  | ☐ DELETE   | 4.1 TITLE                    | 1   |   | Change  Addition                    |
| NAME  | AHO, EDWARD I.  |  | 4. 2 NAME                    | 3   | 75 W 5 4 5  | n. 1                                |
| STREET ADDRESS  | 800 OCEAN DRISTE PHILI-   |  |                              | ADDRESS \$ 4.   | 52 W Boyaton Beach<br>Lynton Beach FL 33                      | Blud#2                              |
| CITY-ST-ZIP   | JUNO BEACH FL   |  | 4.4 CITY - S                 | T-ZIP 50  | Ynton Beach FL 33   | 4 4 4 6                             |
| TITLE   |   | L_J DELETE   | 5.1 TITLE                    |   |   | Change Addition                     |
| NAME  |   |  | 5.2 NAME                     |   |   |                                     |
| STREET ADDRESS  |   |  | 5.3 STREET                   | ADDRESS   |   |                                     |
| CITY-ST-ZIP   |   |  | 5.4 CITY - S                 | 31 - ZIP  |   |                                     |
| TITLE   |   | DELETE   | 6.1 1ITLE                    |   |   | Change Addition                     |
| NAME  |   |  | 6.2 NAME                     |   |   |                                     |
| STREET ADDRESS  |   |  | 6.3 STREET                   | ADDRESS   |   |                                     |
| CITY-ST-ZIP   |   |  | 64 CITY-S                    |   |   |                                     |

14. 1 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 processor or trusted 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.