FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jul 31, 2001 8:00 am P00000010192 **DOCUMENT # Secrétary of State** 1. Entity Name SEALESTIAL SHIRTS, INC. 07-31-2001 90238 048 ***550.00 Principal Place of Business Mailing Address 2906 NORTH DAVIS HIGHWAY 2906 NORTH DAVIS HIGHWAY PENSACOLA FL 32503 PENSACOLA FL 32503 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Country Zio Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARTMAN TERRY SPIEGEL & UTRERA, P.A. Street Address (P.O, Box Number is Not Acceptable) 343 ALMERIA AVENUE DAWIS **CORAL GABLES FL 33134** Zip Code PENSACOLA <u>3250</u>3 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 SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12 PTD TITLE Delete TITLE ☐ Change ☐ Addition CR2E034 (5/01 HARTMAN, TERRY T NAME NAME 2906 NORTH DAVIS HIGHWAY STREET ADDRESS STREET ADDRESS PENSACOLA FL 32503 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE HARTMAN, GLENDA A NAME 2906 NORTH DAVIS HIGHWAY STREET ADDRESS STREET ADDRESS PENSACOLA FL 32503 CITY-ST-ZIP CITY-ST-7IP TITI F ☐ Change ☐ Addition Delete NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TIT! F TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 11 or Block 12 if