

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000042872	
1. Entity Name SEAMAR IMPORT EXPORT, INC.	

Principal Place of Business 444 BRICKELL AVE. STE 51-366 MIAMI, FL 33131-2492	Mailing Address 444 BRICKELL AVE. STE 51-366 MIAMI, FL 33131-2492
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1016434	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROBERTS, JAYSON M 444 BRICKELL AVE. STE 51-366 MIAMI, FL 33131-2492

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000493506 04/20/06-80009-007 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ROBERTS, JAYSON M 444 BRICKELL AVE. STE 51-366 MIAMI, FL 331312492
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SELF, RICHARD 444 BRICKELL AVE. STE 51-366 MIAMI, FL 331312492
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SANCHEZ, DANIEL 444 BRICKELL AVE. STE 51-366 MIAMI, FL 331312492
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>Rich Self</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date <u>4/4/06</u>	Daytime Phone # <u>786-412-7069</u>
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