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FILED Jun 30, 2002 8:00 am

Secretary of State

2002 UNIFORM BUSINESS REPORT (UBR)

P01000085873 **DOCUMENT #** 05-23-2002 90064 037 ***150.00 SEJI. INC. Principal Place of Business THE MALL AT WELLINGTON GREEN THE MALL AT WELLINGTON GREEN 10300 W. FOREST HILL BLVD., STE #105 10300 W. FOREST HILL BLVD., STE #105 WELLINGTON FL 33414 WELLINGTON FL 33414 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ~DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-11362 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired B. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ISTURIZ, WILFREDO Street Address (P.O. Box Number is Not Acceptable) THE MALL AT WELLINGTON GREEN 10300 W. FOREST HILL BLVD., STE #105 **WELLINGTON FL 33414** Zip Code 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. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its intengible: FILE NOW!!! FEE-IS \$150 00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete RESIDENT TITLE Change Addition NAME ARRUA, EMILIO R LOSE A. ALVEZ 2053 VINNES CIR #510 NAME 10300 W. FOREST HILL BLVD., STE #105 STREET ADORESS STREET ADDRESS CITY-ST-ZIP **WELLINGTON FL 33414** WELLINGTON, FL 33414 CITY-ST-ZIP ☐ Delete TITLE SEN VICE PRESIDENT Change Change ☐ Addition NAME SERGIO ALVEZ 2053 VIVINGE CIR FISIO NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WELLINGTON FL 33414 ME & ENGRAL PHANAGER CITY-ST-ZIP TITLE Delete Change C Addition -15ABEL CAPACHO 2053 VININGS CIR #510 WELLINGTON, FL 33414 NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

13. 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 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

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE:

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NAME

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

☐ Delete

04/29/02

(561) 7985801

☐ Channe

☐ Change ☐ Addition

☐ Addition