

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90145 032 ***150.00

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DOCUMENT # P02000018524

1. Entity Name

SETH INTERNATIONAL HOLDINGS LIMITED, INC.



Principal Place of Business

**5985 S UNIVERSITY DR #118
DAVIE FL 33328**

Mailing Address

**5985 S UNIVERSITY DR #118
DAVIE FL 33328**

2. Principal Place of Business

1844 N NOB HILL ROAD

3. Mailing Address

1844 N NOB HILL RD

Suite, Apt. #, etc.

#214

Suite, Apt. #, etc.

#214

City & State

PLANTATION, FL

City & State

PLANTATION, FL

Zip

33322

Country

USA

Zip

33322

Country

USA

4. FEI Number

75-3014468

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

GREN, ALEXANDER

5985 S UNIVERSITY DR #118

DAVIE FL 33328

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1844 N-NOB HILL ROAD

#214

City

PLANTATION

FL

Zip Code

33322

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]

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/14/03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **GREN, ALEXANDER**
STREET ADDRESS **5985 S UNIVERSITY DR #118**
CITY-ST-ZIP **DAVIE FL 33328**

TITLE **SD** ☒ Delete
NAME **ROFE, MEIR**
STREET ADDRESS **5985 S UNIVERSITY DR #118**
CITY-ST-ZIP **DAVIE FL 33328**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1844 N NOB HILL ROAD, #214**
CITY-ST-ZIP **PLANTATION, FL 33322**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/03

Date

Daytime Phone #

CR2E034 (10/02)