

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000028367

FILED  
Feb 21, 2003  
Secretary of State

Entity Name: SEFL INC.

## Current Principal Place of Business:

5300 NW 12TH AVENUE SUITE 1  
FORT LAUDERDALE, FL 33309

## New Principal Place of Business:

3317 NW 10TH TERRACE  
405/406  
OAKLAND PARK, FL 33309 US

## Current Mailing Address:

5300 NW 12TH AVENUE SUITE 1  
FORT LAUDERDALE, FL 33309

## New Mailing Address:

3317 NW 10TH TERRACE  
405/406  
OAKLAND PARK, FL 33309 US

FEI Number: 01-0641575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIOCE, DOMENICK R  
1645 PALM BEACH LAKES BLVD SUITE 1200  
WEST PALM BEACH, FL 33401

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR ( ) Change (X) Addition  
Name: RICHBELL, ALAN T P/S/T  
Address: 7705 HOFFY CIRCLE  
City-St-Zip: LAKE WORTH, FL 33467 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN RICHBELL

P

02/21/2003

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date