

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

FORM 6000
AV

DOCUMENT # P02000083086



1. Entity Name
SEAHORSE ENTERPRISES, INC.

04-16-2003 90211 045 ***150.00

Principal Place of Business
**3520 EAST TREE TOPS COURT
DAVIE FL 33328**

Mailing Address
**3520 EAST TREE TOPS COURT
DAVIE FL 33328**



2. Principal Place of Business
6221 Appaloosa Trail
Suite, Apt. #, etc.

3. Mailing Address
6221 Appaloosa Trail
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
S.W. Ranches,

City & State
S.W. Ranches

4. FEI Number
54-2067430

Applied For
 Not Applicable

Zip
33330

Country
U.S.A.

Zip
33330

Country
U.S.A.

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LYONS, SEAN T
3520 EAST TREE TOPS COURT
DAVIE FL 33328**

Name
Street Address (P.O. Box Number is Not Acceptable)
6221 Appaloosa Trail
City **S.W. Ranches** **FL** Zip Code **33330**

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)

4/13/03
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	LYONS, SEAN T	3520 EAST TREE TOPS COURT	DAVIE FL 33328	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		6221 Appaloosa Trail	S.W. Ranches, FL 33330	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/03 **954-612-2224**
Date Daytime Phone #

CR2E034 (10/02)