

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2003 8:00 am
Secretary of State

05-29-2003 90540 001 ***300.00
05-29-2003 90540 002 ***250.00

DOCUMENT # P02000087032

1. Entity Name
SEAN SUNDVALL, INC.



Principal Place of Business
657 BUCKINGHAM DR.
OVIEDO FL 32765-8113

Mailing Address
657 BUCKINGHAM DR.
OVIEDO FL 32765-8113

2. Principal Place of Business
1156 Hampshire Ave
Suite, Apt. #, etc.

3. Mailing Address
SAME
Suite, Apt. #, etc.

City & State
Deltona

City & State
Deltona, Florida

Zip 32725 **Country** USA

Zip 32725 **Country** USA

4. FEI Number
412080357

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

SUNDVALL, SEAN M
657 BUCKINGHAM DR.
OVIEDO FL 32765-8113

7. Name and Address of New Registered Agent

Name SUNDVALL, SEAN M.
Street Address (P.O. Box Number is Not Acceptable) 1156 Hampshire Ave
City Deltona **FL** **Zip Code** 32725

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 *Sean M. Sundvall* SEAN M. SUNDVALL

DATE 5/27/03

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 ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME SUNDVALL, SEAN M
STREET ADDRESS 657 BUCKINGHAM DR.
CITY-ST-ZIP OVIEDO FL 32765-8113

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME SEAN SUNDVALL
STREET ADDRESS 1156 Hampshire Ave
CITY-ST-ZIP Deltona, FL 32725

TITLE D ☒ Change ☐ Addition
NAME SUNDVALL, SEAN M.
STREET ADDRESS 1156 Hampshire Ave
CITY-ST-ZIP Deltona, FL 32725

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

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NAME
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CITY-ST-ZIP

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: *Sean M. Sundvall*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 5/27/03 **Daytime Phone #** (407)-405-0210

CR2E034 (10/02)