

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90247 032 ***150.00

DOCUMENT # P03000020795

1. Entity Name
SEBENZA, INC.



Principal Place of Business
**413 NE 12TH AVE.
FORT LAUDERDALE, FL 33301 US**

Mailing Address
**413 NE 12TH AVE.
FORT LAUDERDALE, FL 33301 US**

94072469



2. Principal Place of Business
516 SW 17TH STREET

3. Mailing Address
516 SW 17TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04272004 Chg-P CR2E034 (10/03)

City & State
FORT LAUDERDALE, FLORIDA

City & State
FORT LAUDERDALE, FLORIDA

4. FEI Number
65-1177344

Applied For
Not Applicable

Zip
33315

Country
USA

Zip
33315

Country
USA

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

**ACTIVE FILINGS, LLC
10651 NE 11TH COURT
MIAMI SHORES, FL 33138**

Name
BYRAN K. KITCHINER

Street Address (P.O. Box Number is Not Acceptable)
516 SW 17TH STREET

City
FORT LAUDERDALE **FL** Zip Code
33315

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 **BYRAN K. KITCHINER (VICE PRESIDENT)** **04/27/04**

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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
P ☐ Delete

NAME
ASMUS, MIETTE A.

STREET ADDRESS
413 NE 12TH AVENUE

CITY-ST-ZIP
FORT LAUDERDALE, FL 33301

TITLE
P ☒ Change ☐ Addition

NAME
ASMUS, MIETTE A

STREET ADDRESS
516 SW 17TH STREET

CITY-ST-ZIP
FORT LAUDERDALE, FL 33315

TITLE
VP ☐ Delete

NAME
KITCHINER, BYRAN K

STREET ADDRESS
413 NE 12TH AVENUE

CITY-ST-ZIP
FORT LAUDERDALE, FL 33301

TITLE
VP ☒ Change ☐ Addition

NAME
KITCHINER, BYRAN K

STREET ADDRESS
516 SW 17TH STREET

CITY-ST-ZIP
FORT LAUDERDALE, FL 33315

TITLE
NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition

STREET ADDRESS

CITY-ST-ZIP

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NAME ☐ Delete

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NAME ☐ Change ☐ Addition

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: **MIETTE A. ASMUS (PRESIDENT)**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/27/04 **954-763-8878**

Date Daytime Phone #