

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90015 049 ***150.00

DOCUMENT # P07000106038

1. Entity Name

SEEGMA USA, INC.



Principal Place of Business

5960 NW 99 AVE.
SUITE 4
MIAMI FL 33178

Mailing Address

5960 NW 99 AVE.
SUITE 4
MIAMI FL 33178



2. Principal Place of Business - No P.O. Box #

4698 NW 74TH AVE.

Suite, Apt. #, etc.

3. Mailing Address

4698 NW 74TH AVE.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

MIAMI, FL

Zip

33166

Country

USA

City & State

MIAMI, FL

Zip

33166

Country

USA

4. FEI Number

71-1041956

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLORIDA CORPORATE REGISTERED AGENTS, INC.
7200 NW 19 ST.
SUITE 301
MIAMI FL 33126

7. Name and Address of New Registered Agent

Name
FLORIDA CORPORATE REGISTERED AGENTS, LLC.

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

7200 NW 19 ST.

SUITE 301

City

MIAMI

FL

Zip Code

33126

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] MEMBER-MANAGER

Signature typed (printed name) of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-6-08

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PINHEIRO- DA SILVA , EDI C
5960 NW 99 AVE., STE. 4
MIAMI FL 33178 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PINHEIRO-DA SILVA, EDI C.
4698 NW 74TH AVE.
MIAMI, FL 33166 ☐ Change ☒ Addition

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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]

EDI PINHEIRO-DA SILVA 3-6-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(305) 477-7447 x101

Daytime Phone #