FILE NOW. FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 15 1998 8:00am
Secretary of State

DOCUMENT # P92000011563 (3)

1. Corporation Name
SEA-BARGE, INC.

[redacted]

Principal Place of Business	Mailing Address
~~2075 TALLEYRAND AVE.~~ ~~JACKSONVILLE FL 32206~~	7570 N.W. 14TH ST. MIAMI FL 33126-1702

3. Date Incorporated or Qualified: 12/11/1992
3a. Date of Last Report: 02/08/1996

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 — County — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 — Country — 30

4. FEI Number: 65-0395657 — ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.023, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~MEJER, ALVARO L~~
~~2600 DOUGLAS ROAD~~
~~SUITE 1111~~
~~CORAL GABLES FL 33134~~

Luis E. Gonzalez JR.
7570 NW 14 St.
Miami, Fl. 33126

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box # not acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	P
NAME	~~SHEA, MD~~	12 NAME	HECTOR CALDERON
STREET ADDRESS	~~2075 TALLEYRAND AVE~~	13 STREET ADDRESS	7570 NW 14 St
CITY-ST-ZIP	~~JACKSONVILLE FL 32206-0037~~	14 CITY-ST-ZIP	MIAMI, FL 33126
TITLE	V	21 TITLE	V
NAME	~~BROWN, TOM W~~	22 NAME	JORGE LORA
STREET ADDRESS	~~2075 TALLEYRAND AVE~~	23 STREET ADDRESS	7570 NW 14 ST
CITY-ST-ZIP	~~JACKSONVILLE FL 32206-0037~~	24 CITY-ST-ZIP	~~MIAMI, FL 33126~~
TITLE		31 TITLE	V
NAME		32 NAME	CARLOS PERDOMO
STREET ADDRESS		33 STREET ADDRESS	7570 NW 14 ST
CITY-ST-ZIP		34 CITY-ST-ZIP	~~MIAMI, FL 33126~~
TITLE		41 TITLE	V
NAME		42 NAME	LUIS GONZALEZ
STREET ADDRESS		43 STREET ADDRESS	7570 NW 14 ST
CITY-ST-ZIP		44 CITY-ST-ZIP	MIAMI, FL 33126 (PRESIDENT)
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	000002665060
STREET ADDRESS		63 STREET ADDRESS	-10/16/98--01009--019
CITY-ST-ZIP		64 CITY-ST-ZIP	***550.00

PE 10-15

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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 12 or Block 13 if changed or added by this report, with my address.

SIGNATURE: _____ 9/23/98

SIGNATURE AND TITLE OR NAME AND ADDRESS OF AUTHORIZED REPRESENTATIVE OR DIRECTOR

(30) S97-1394

0166508