FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P92000013732 (2)

SEA HAG, INC.

FILED May 01 1998 8:00am Secretary of State



1/27/98

Principat Plac	e of Business	Mailing Address				Anima trade itett iball it.	(14 1191 1891
87000 OVERSEAS HWY. 87000 OVERSEAS HWY.							
ISLAMORADA FL 33036 ISLAMORADA FL 33036					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					12/23/1992		
2. Principal P	Place of Business	2a. Mailing Address		- 3	4. FEI Number	Ap	oplied For
21404 MAHOGANY CIR 26 P.O. B			2509		65-0377793		ot Applicable
Suite, Apt. #, etc. / Suite, Apt. #, etc.					5. Certificate of Status Desired	S8.75 A	
City & Stat	lo.	City & State				Fee Re	
City & Stat	- k	·		Election Campaign Financing Trust Fund Contribution	\$5.00 ☐ Added t		
Zip /	CARGO, FL Country	Zip CE V CARGO	Countr	 -	8. This corporation owes or has paid		
24 3303	37 25 USA	29 33037-75093	0 215	A	Personal Property Tax due June 30		No
	9. Name and Address of Curren				10. Name and Address of New Regis		
BE	ELLINGER, MATTHEW J		81	Name			
	MAHOGANY CIR.		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
KE	EY LARGO FL 33037		L				
			83	1			
			84	City		85 Zip (Code
				1			
11. Pursuant	to the provisions of Sections 607,0502	? and 607.1508. Florida Statutes	s, the abov	e-named corp	poration submits this statement for the pur tion's board of directors. I hereby accept t	pose of changing its	s registered registered
agent. I a	m familia, with, and accept the obliga	tions of, Soution 607 0505, Flori	da Statute	S.	none beard of directors. Thereby decept t	1 2000	, egiotor co
SIGNATURE		MAI	BEL	INGEL	ired when reinstating)	4-27-98	
40	Signatur, typed or printing nance registered aper			ent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DC AND DIDECTOR	O IN 12
12.	A CENS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICE	Change	Addition
NAME	B ELLINGER, MATTHEW J		1.2 NAME				
STREET ADDRESS	404 MAHOGANY CIR.			T ADDRESS			
CITY-ST-ZIP	KEY LARGO FL		1.4 CITY-				
TITLE			2.1 TITLE			☐ Change	Addition
NAME	B ELLINGER, ANA		2.2 NAME	1			
STREET ADDRESS	404 MAHOGANY CIR.		2.3 STREE	T ADDRESS			ļ
CITY-ST-ZIP	KEY LARGO FL		2. 4 CITY-	ST-2IP			
TITLE		☐ DELET E	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME	Ì			
STREET ADDRESS			3.3 STREE	T ADDRESS			·
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			L Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CHTY - 5.1 TRILE	ST-ZIP		Change	Addition
TITLE			5 2 NAME			Onange	- radiion
NAME STREET ADDRESS				I ADDRESS			
							ļ
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	01-4IF		Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				T ADDRESS			ľ
CITY-ST-ZIP]		6.4 CITY-				
14. I hereby o	certify that the information supplied wi	h this filing does not qualify for	the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I fui	rther certify that the	information
indicated	i on this a nnual report or supplemental	Lannual report is true and accur	rate and th	iat my signatu	ire shall have the same legal effect as if m	nade under oath: tha	atlam an Ì
Block 12	or Block 13 if changed or on an attac	hypent with an address	.coato trilo	poi. 60 104	uired by Chapter 607, Florida Statutes; an	a my mario app	