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 # P93 1. Corporation Name SEASAW DELIVERIES, INC. P9300007640 (4)

FILED May 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							
*		SS	Mailing Add				
1507 HAYES STREET HOLLYWOOD FL 33020			1507 HAYE HOLLYWOX	S STREET DD FL 33020			DO NOT HIDITS IN THE OTHER
							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
♣ Pitest if	B = 16		· 				01/26/1993
2. Principal Place of Business			⊢ – ~	28. Mailing Address			4. FEI Number Applied For
21			· • · • · · · · • • • • • • • • • • • •	[26]			65-0386529 Not Applicable
Suite, Apt. #, etc.			27 Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired
City & State			City & St	City & State			Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees	
Zip		Country	Z ip	Zip Country		<i>y</i>	8. This corporation owes or has paid the current year letangible
24		25	29		30		Personal Property Tax due June 30. Yes X No
		and Address of Curr	ent Registered Age	ent			10. Name and Address of New Registered Agent
	awyer, Ch				81	Name	e
1507 HAYES STREET				82 Street Ad			t Address (P.O. Box Number is Not Acceptable)
HOLLYWOOD FL 33020				02 Sheet Ack			Tribulation (1.10. Box (Maribol in Mot Propopliable)
					83		
					84	City	OF Tip Code
					ľ	' '	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or 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							
12.	Signature, typica		NO DIRECTORS	(INCITE:	13.	ent signatur	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	or rearrant		DELETE	1.1 THILE		Change Addition
NAME	SAWYE	R, CHARLES	_		1.2 NAME		U change (Accuration
STREET ADDRESS		AYES STREET			1.3 STREET	. 1000000	
CITY-ST-ZIP		WOOD FL 33020			4		
TITLE	1111111			DELETE	1.4 City - S 2.1 Title	51 - ZIP	Change Addition
NAME			<u>.</u>	J DOLL IC	2.2 NAME		
STREET ADDRESS					2.3 STREET	* VUDDE ČC	
CITY-ST-ZIP					2. 4 CITY-:		
TITLE				DELETE	3.1 TITLE	31-Zir	☐ Change ☐ Addition
NAME				J	3.2 NAME		
STREET ADDRESS					3 3 STREET	ADDRESS	
CITY-ST-ZIP					3.4. CITY - 5		
TITLE	 			DELETE	4.1 TITLE	νι επ <u>.</u>	Change Addition
NAME					4. 2 NAME		
STREET ADDRESS					4.3 STREET	ADDRESS	
CITY-ST-ZIP					4.4 CITY-S		
TITLE				DELETE	5.1 TITLE		Change Addition
NAME					5.2 NAME		
STREET ADDRESS					5.3 STREET	ADDRESS	
CITY-ST-ZIP					5.4 CITY - S		
TITLE				DELETE	6.1 TITLE		Change Addition
NAME				_	62 NAME		
STREET ADDRESS		_		1	6.3 STREET	ADDRESS	
CITY-ST-ZIP		\wedge	_		6.4 CITY-S		
14. I hereby			with this filing does	not qualify for	the exemp	tion state	led in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual (eport of supplemental) indiat 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 of the receptor 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, of on an attrustment with an address.							