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

P93000018067 (7) DOCUMENT # 1. Corporation Name

SESIN INTERNATIONAL CORP.

Principal Place of Business

FILED

Jan 16 1998 8:00am

Secretary of State

Mailing Address 7764 SW 57TH TERRACE 7764 SW 57TH TERRACE MIAMI FL 33143 MIAMI FL 33143 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/10/1993 2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For 65-0397752 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 区 Added to Fees Trust Fund Contribution 23 28 Zip Ζıp Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JOSE L. SESIM 7764 SW 57TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33143** 83 84 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 Signature, lyped or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ■ DELETE ☐ Addition 1.1 TITLE TITLE SESIN, JOSE L 1.2 NAME NAME 7764 SW 57TH TERR 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition DELETE Change 21 TITLE NAME 2.2 NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ___ Addition DELETE 31 TITLE TITLE 3.2 NAME NAME **3 3 STREET ADDRESS** STREET ADDRESS 3.4. CITY - ST - ZIP CITY-S1-ZIP Change ■ Addition DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ■ Addition 51 TOLE TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** 54 CITY-S1-ZIP CITY-ST-ZIP ☐ DELETÉ Change Addition 61 TITLE TITLE 62 NAME NAME 63 STREET ADDRES STREET ADDRESS 64 CITY-ST-Z CITY - ST - ZIP

14. 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 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; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this poort as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.