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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000037242 (3)

SEABURH,	INC.				Laguari (il dene and èran bank bend ern)	BONIO STATE SOCIAL ALBIA DI GLA MORI DORI
Principal Place of	Business	Mailing Address				
\$705 OVERSEAS HWY MARATHON FL 33050 US		9705 OVERSEAS HWY MARATHON FL 33050-3342 US				
					3. Date Incorporated or Qualified 05/21/1993	3a. Date of Last Report 05/20/1996
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt. #, etc.		26			65-0420201	Not Applicable
22		Suite, Apt., #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country		8. This corporation has liability for i	ntangible tax under s. 199.032,
24	25 Name and Address of Curren	29	30			Yes No
		i riegistered Agent	81	Name	10. Name and Address of New Re	Jistered Agent
	, neta l Verseas hwy					
	ON FL 33050		82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)
***************************************	70,1112 00000		83			
			84	City		
			1 1	•		FL 85 Zip Code
 Pursuant to the office or regis 	e provisions of Sections 607.050 tered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida, Such change was a	s, the above	named corporation	oration submits this statement for the pon's board of directors. I hereby accept	urpose of changing its registered
agent I am fa	miliar with, and accept the obliga	ations of, Section 607.0505, Flo	rida Statutes	·	one board or encoders. Thereby decep	t the appointment as registered
SIGNATURE Signal	ature, typed or printed name of registered age	the production of the Paragraphic AMOTE	Francista and Associ		ed when reinstating)	
12,	OFFICERS AND		13,	it signature require	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE D	A PARTITION OF THE PART	DELETE	1.1 1111.6	··· T		Change Addition
	EIBER, DONALD D		1.2 NAME			
	05 OVERSEAS HWY		1.3 STR£E1 /	ADDRESS		
	ARATHON FL	T office.	1,4 CITY - ST	- ZIP	WWW.NET	
TITLE		☐ DELETE	2.1 10116	İ		L. Change L Addition
STREET ADDRESS			2.2 NAME 2.3 STREET	A DOUBLE OF		
CITY-ST-ZIP			2.4 CHY-S			
TITLE		DELETE	3.1 11iLF	1-211		Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET A	ADDRESS		1
CITY-ST-ZIP			3.4. CITY-S1	- 210		
TITLE		LJ DELFTE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET A			
CITY-ST-ZIP TITLE		DELETE	4.4 CHY-ST 5.1 TITLE	- ZIP		Change Addition
NAME		Land Decert	5.7 NAME			COllarge CO Aboliton
STREET ADDRESS			5.3 STREET A	DORESS		
CITY-ST-2IP			5.5 GHRETY			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			63 STREET A	22 1800		ļ

14. I do hereby certify that the information supplied with his 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 agrue, report or symbol emental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the collection