## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P9300058050 (4)

SEA-RAMICS, INC.								
Principal Place of	f Business	Mailing Addre	ss				08101 <b>08101 0</b> 11 <b>0</b> 1	IO(II OUID) DINN OUN IODI
3504 CENTURY		3504 CENTUR	RY BLVD.					
STE. 4		STE. 4	STE. 4 LAKELAND FL 33811					
LAKELAND FL 3	13811	LAKELAND F				3. Date incorporated or Ourlified 08/17/1993  3a. Date of Last Report 01/02/1996		
Principal Place	a of Business	2a. Mailing Ad	Idress			4. FET Number	1	Applied For
rnii (ipai riaci	e or positioss	26				65-0432025		Not Applicabl
Suite, Apt. #,	etc.	Suite, Apt	#, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
		27				6. Election Campaign Financing		\$5.00 May Be
City & State		City & Sta	te			Trust Fund Contribution		Added to Fees
Zus)	Country	<b>28</b>		Country		8. This corporation has liability for		under s. 199.032,
Zip 	25	29	29 30			Florida Statutes		
<u> </u>	9. Name and Address of Cur	rent Registered Age	nt			10. Name and Address of New	Registered A	igeni
SCHAFFE	R, LAURA F			81 82	Name Street Addr	ess (P.O. Box Number is Not Accept	able)	
3504 CEN	TURY BLVD.			83	· · · · · · · · · · · · · · · · · ·	<u></u>		
STE. 4	D E1 00044							85 Zip Code
	D FL 33811			84	City	ration submits this statement for the professional directors. Thereby accept the appropriate the agency is the professional content of the pro	FL	1 '
2.		AND DIRECTORS	DELETE	F Registered Ager  1. 1 TILE	1 signature require	ADDITIONS/CHANGES TO O		DIRECTORS IN 12 Change Additio
NLE	D	L	DEFEIF	1, 1 TITLE 1,2 NAME			_	
AME	SCHAFFER, SHEILA A	E 4		1.3 STREET	ADDRESS			
TREET ADDRESS	3504 CENTURY BLVD, STI LAKELAND FL 33811	E. <b>4</b>		1.4 CITY - S				
TY-ST-ZIP	VPT		DELETE	2 1 TITLE			[	Change C Addition
AME	SCHAFFER, LAURA			2 2 NAME				
STREET ADDRESS	3504 CENTURY BLVD., ST	E. 4		2 3 STREE				
CITY-ST-ZIP	LAKELAND FL 33811	· · · · · · · · · · · · · · · · · · ·	DELETE	2.4 City - 3	ST - 7IP			Change Addition
ITLE		L	DELFTE	3 1 TITLE 3 2 NAME			•	
IAME					LADDRESS			
STREET ADORESS				3.4 CITY -:				
CITY - S1 - ZIP			DELETE	4 1 THTLE		<del></del>	I	Change
NAME				4.2 NAME				
STREET ADDRESS					1 ADDRESS			
CITY-ST-ZIP			חנובוב	4.4 C 1Y - 5 1 11TLE				Change Additi
ULTE			DELETE	5 1 TITLE 5 2 NAME			,	_
NAME				1	LADORESS			
STREET ADDRESS				5.4 CITY-	İ			
C-TY - ST - ZIP Title			DELETE	6 1 TiTLE	<b>f</b>			Change Additi
NAME				6.2 NAME				
STREET ADDRESS				G 3 STREE	T ADDRESS			
CITY - ST - ZIP		P. J. M. Ali Pr.	ali inta-ih i f	6.4 CITY		for the exemption stated in Section	119.07(3)(k), FI	orida Statutes. I furthe
certify that oath; that appears in	by certify that the information support the information indicated on this I am an officer or director of the Block 12 or Block 13 if changes	corporation or the rece d, or on an attachment	eiver or truste with an add	e en ipowered	I to execute t	r for the exemption stated in Section rate and that my signature shall have his report as required by Chapter 60.	7, Florida Statu	tes; and that my har

LAVAN SCHAPPER SIGNATURE: Sausa