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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

P94000010362 (9)

DOCUMENT #
1. Corporation Name

SEVILLE ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED May 01 1996 8:00 am Secretary of State



2360 S.W. 1 MIAMI FL 3	139TH PLACE 3175	2360 S.W. 139TH PL MIAMI FL 33175	ACE				
					3. Date Incorporated or Qualified 3a. Date of Last Report 02/02/1994 02/14/1995		
	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0467010		Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	27		5. Cortificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Ζιρ 24	Country 25	7 _(F)	Country 30		This corporation has liability for intangible tax under s 199.032. Florida Statutes		
···	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Re	gistered Agen	l
			81	Name			
NAVEIRA, JUAN C 2360 S.W. 139TH PLACE				Street Add	ress (P.O. Box Number is Not Acceptable	9)	
	FL 33175		83		V		
				City		FL 85	Zip Code
familiar wi	to the provisions of Sections 507.0503 red agent, or both, in the State of Flori th, and accept the obligations of. Sect			med corporation's boa	ration submits this statement for the purp rd of directors. I hereby accept the appoint	ose of changing intrnent as regist	its registered office ered agent. I am
SIGNATURE	Signature, typed or printed manie of registerist age of	er a friedrami, et a	D'E Registered Après	erio de la Cina	a Alaca and a second second	DATE	
12.	OFFICERS AN		I 13.	: grator appre	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	PD	DELETE	1 1 TrTLE			Cha	
NAME	NAVEIRA, GRACIELA		1.2 NAME	1			g. [1]
STREET ADDRESS	2360 S.W. 139TH PLACE		13 STREET A	DORESS			
CITY-ST-ZIP	MIAMI FL 33175		14 CITY - ST				
TIFLE	TD	☐ DELETE	2 1 7111.5			☐ Cha	nge
NAME	NAVEIRA, JUAN C		2.2 NAME	l			_
STREET ADDRESS	2360 S.W. 139TH PLACE		2 3 STREET A	DORESS			
CITY-ST-ZIP	MIAMI FL 33175		2.4 CH.Y - ST -	ZIP			
TITLE		DELETE	3 1 TITLE			☐ Cha	nge 🔲 Addition
NAME			3.2 NAME				
STREET ADDRESS			33 STREET A	.0 0885\$			
CITY-ST-ZIP			34 OTY - \$1 -	70P			
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NAME			4.2 NAME				
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CITY - ST - ZIP			4.4 CITY - ST -	ZIP			
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NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET AS	008ESS			İ
CITY-ST-ZIP			5.4.C-TY - ST -	7.P			
TITLE		☐ DELETE	€ 1 T:TLF			☐ Char	nge 🔲 Addition
NAME			€ 2 NAME				
STREET ADDRESS			6 3 STREET A	ORESS			
CITY - ST - ZIF			6.4 City - S1 -	ZIP			
14. I do hereb	y certify that the information supplied v	vith this filing is voluntarly furn	nished and does r	not qualify fo	or the exemption stated in Section 119.0.	7(3)(k) Elorida St	atutos I furthor

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 appears in Block 12 or Block 13 if changed, or or particularly with an arbitress.

SIGNATURE: __

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR