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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

GNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400058188 (1)

SEAGREEN MANAGEMENT CORPORATION

5975 SUNSET DR 501 SOUTH MIAMI FL 33143 US				5975 SUNSET DR 501 SOUTH MIAMI FL 33143-5198 US											
											3. Date Incorporated or Qualified				
2. Principal Pl	lace of Busin	ress		2a. M	failing Address						4. FEI Number		<u> </u>		olied For
21			ļ.	26							65-0533803			Not	Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.							5. Certificate of Status Desired				dditional
22				27										quired	
City & State				City & State						1	Etection Campaign Financing Trust Fund Contribution				May Be o Fees
Zip	Country				Zip Cou						8. This corporation has liability for				
24	25				29 30						Florida Statutes SY Yes No				100.002,
1	9. Name	and Address			red Agent		T		·····	1	IO. Name and Address of New I	Registere	d Agent		
GRE	EN, CARE	Y DR.					81	7	Name						
5975 SUNSET DR							82	-	Street A	ddress (P.O. Box Number is Not Acceptable)					
SUITE 501 SOUTH MIAMI FL 33143							83	<u> </u> _				<u>,</u>			
SOU	JIH MIAMI	FL 33143					63								
							84		City	•		F	L 85	Zip C	ode
11, Pursuant	to the provis	sions of Section	s 607.0502 ar	id 607	.1508, Florida Statu	ites, the	e above	e-r	named c	corporal	ition submits this statement for the	purpose	of chang	ing its	registered
agent La	ım familiar w	ith, and accep	the obligation	is of, S	Section 607.0505, F	lorida	Statutes	s."	ne corpe	orations	's board of directors. I hereby acc		opolitimei 		egistered
SIGNATURE		Cerrey 1		ب.			424			ব্ৰ ৷		4//4	/97	7	
10	Signature types	or printed name of				·····	····	ent	signature re	required wi	then reinstating) ADDITIONS/CHANGES TO OFI	DATE	UD DIDEC	TOD	C (N) 10
12.	P	UIT.	CERS AND D	INECT	DELETE		13. 1.1 TITLE		·T	·•··	ADDITIONS/CHANGES TO OF	FICERS A	Cha		Addition
NAME	GREEN	CAREY DR.					1.2 NAME						U.,	gv	7.00/1.01
STREET ADDRESS		NSET DRIVE	SUITE 501				1.3 STREET	14 1	ODRESS						
CITY-ST-7IP		MIAMI FL 33					1.4 CITY - S								
TITLE					DELETE	_	2.1 TITLE						☐ Cha	inge	Addition
NAME						2	2.2 NAME								
STREET ADDRESS						2	2.3 STREET	[AL	DDRESS						
CITY-SI-7IP						2	2. 4 CITY - 1	ST-	ZIP						
TITLE					☐ DELETE	3	3.1 TITLE				*	34 Tut	- Cha	inge	Addition
NAME						3	3.2 NAME								
STREET ADDRESS						3	3 3 STREET	A.	DDRESS						
CITY+ST-ZIP		***			DELETE		3 4. CITY - 1	SI-	ZIP				Cha	Dat.	Addition
TITLE	ĺ				L] DELETE		4.1 TITLE						LL UN	រៈប្រេដ	Addition
NAME expect addresses							4 2 NAME		nnaece						
STREET ADDRESS CITY - S1 - ZIP							4.3 STREET 4.4 CHTY - S				•				
TITLE					DELETE		4.4 CHT - S 5.1 TITLE	-10	T-IL			==	Cha	ange	Addition
NAME	1						5.2 NAME								
STREET ADDRESS							5.3 STREET	T AL	DDRESS						
CITY-ST-ZIP	}						5.4 CITY - 5						•		
TITLE					DELETE	*********	6.1 TITLE	•••••			***************************************		Cha	ange	Addition
NAME						: 6	6.2 NAME					•			
STREET ADDRESS						6	6.3 STREET	I A	DDRESS						
ITY-ST-ZIP	L					····	6.4 CITY - S						····		
informatio Lam an o	on indicated officer or dire	on this annual ector of the cor	report or supportation or the	olemer Fecei	ntal annual report is	true a wered	nd accu to exec	ura	ate and t	that my	Section 119.07(3)(i), Florida Statu y signature shall have the same let s required by Chapter 607, Florida	gal effect	as if mad	le unc	der oath; that