

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 28 1997 8:00am  
Secretary of State

DOCUMENT # P94000062571 (2)

1. Corporation Name

SEACREST GROUP, INC.



Principal Place of Business

224 S MILITARY TRAIL  
230 ROYAL PALM WAY, SUITE 300  
DEERFIELD BEACH FL 33442  
US

Mailing Address

224 S MILITARY TRAIL  
230 ROYAL PALM WAY, SUITE 300  
DEERFIELD BEACH FL 33442-3017  
US

3. Date Incorporated or Qualified

08/22/1994

3a. Date of Last Report

02/07/1996

2. Principal Place of Business

21 7630 NW 6th Ave

22 Suite, Apt. #, etc. Boca Raton, FL

23 City & State

24 Zip 33487

25 Country USA

2a. Mailing Address

26 7630 NW 6th Ave

27 Suite, Apt. #, etc. Boca Raton, FL

28 City & State

29 Zip 33487

30 Country USA

4. FEI Number

65-0520702

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

FIELDS, ROBERT A.  
224 S. MILITARY TRAIL  
DEERFIELD BCH FL 33440

10. Name and Address of New Registered Agent

81 Name Robert A. Fields  
82 Street Address (P.O. Box Number is Not Acceptable) 7630 NW 6th Ave.  
83  
84 City Boca Raton FL 85 Zip Code 33487

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

Robert A. Fields

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P FIELDS, ROBERT A  
5438 NW 109TH WAY  
CORAL SPRINGS FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VP FRIEDLAND, JEFFREY  
20047 PALM ISLAND DR  
BOCA RATON FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ST SCHNEIDER, SCOTT  
7075 YORKSHIRE CT  
BOCA RATON FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D HAUSMAN, ROBERT L  
8048 NW 32ND CT  
BOCA RATON FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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 report 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.

SIGNATURE Robert A. Fields 4/23/97 561-958-2010

CR2E034 (9/96)