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

**PROFIT** CORPORATION ANNUAL REPORT

1998

5240 TUDOR CT.

NAPLES FL 34112



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P94000065386 (2)

SEAGR	AM REAL ESTATE, INC.	•								
Principal Place	e of Business	Mailing Address								
5240 TUDOR NAPLES FL 3	- 1 <del>-</del> 2		ITARIO CANADA P1H2K	DO NOT WRITE IN THIS SPACE						
US		US		3. Date Incorporated or Qualified 08/30/1994	TIIS ST ACC					
2. Principal Pl	2. Principal Place of Business		ess	4. FEI Number	Applied Fo					
21		26		65-0534071	Not Applic					
Suite, Apt. 4	#, etc.	Suite, Apt. #,	etc.	5. Certificate of Status Desired	\$8.75 Addition Fee Required					
City & State		City & State		6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to Fi						
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible					
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registe	red Agent					
01	TO, STEVEN W		81 Name							

## **FILED** Mar 17 1998 8:00am Secretary of State



Street Address (P.O. Box Number is Not Acceptable)

Applied For

Not Applicable \$8.75 Additional

										1			
			84	City	· F	FL.	85	Zip C	ode				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 607.050\$, Florida Statutes.													
SIGNATURE   Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)   DATE													
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	AND	DIREC	TORS	3 IN 1				
TITLE	D	DELETE	1.1 TITLE			$\neg \iota$	Cha	ınge	A	ddition			
NAME	SEAGRAM, EDWARD P		1.2 NAME										
STREET ADDRESS	8 CUMBERLAND CT		1.3 STREET	ADDRESS						}			
CITY-ST-ZIP	MARKHAM ONTARIO CANADA		1.4 CITY-S	T-ZIP									
TITLE		DELETE	2.1 TITLE		<u> </u>		Cha	nge	□ A	ddition			
NAME			2.2 NAME							1			
STREET ADDRESS			2.3 STREET	ADORESS									
CITY-ST-ZIP			2. 4 CITY - S	ST-ZIP									
TITLE		DELETE	3.1 TITLE	_			Cha	nge	☐ A	ddition			
NAME			3.2 NAME		1					ŀ			
STREET ADDRESS			3.3 STREET	address	]					J			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	<u> </u>								
TITLE		DELETE	4.1 TITLE				Cha	nge		ddition			
NAME			4.2 NAME										
STREET ADDRESS			4.3 STREET	ADDRESS	Ì								
CITY-ST-ZIP			4.4 CITY-S	T- ZIP	<u> </u>								
TITLE		DELETE	5.1 TITLE			[	Cha	nge	□ A	ddition			
NAME			5.2 NAME		}								
STREET ADDRESS			5.3 STREET	ADDRESS									
CITY-ST-ZIP			5.4 City - S	T-ZIP	·								
TITLE		☐ DELETE	6.1 TITLE		]		Cha	บอิต		ddition			
NAME			6.2 NAME										
STREET ADDRESS			6.3 STREET	address									
CITY-ST-ZIP			6.4 CITY-S										
14. I 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.													

82