

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000071911 (9)

1. Corporation Name

SEAGRY INTERNATIONAL (USA) LTD., INC.

FILED

1995 JUL 27 AM 10:18

TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

7040 W. PALMETTO PARK RD.
SUITE 2301
BOCA RATON FL 33433

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SUITE 2301
BOCA RATON FL 33433

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/30/1994

3a. Date of Last Report

First 01/95

4. FEI Number

65-0531166

5. Certificate of Status Desired

Not Applicable

\$8.75 Additional
Fee Required

6. Election Campaign Contributions

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 776 S. Military Trail

26 776 S. Military Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

27 City & State

Deerfield Beach, FL

Deerfield Beach, FL

24 Zip

25 Country

29 Zip

30 Country

33442

33442

33442

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607-0502 and 607.1908, 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 607.0405, Florida Statutes.

SIGNATURE

Corporation Information Services Inc

7-12-95

Signature (Type or printed name of registered agent and title if applicable)

(Type Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONAL OFFICERS AND DIRECTORS (If any)

11 TITLE PRESIDENT
12 NAME Laurie Braden
13 STREET ADDRESS 776 S. Military Trail
14 CITY - ST - ZIP Deerfield Beach, FL 33442
21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
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31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP
61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(d), 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: Laurie Braden

(SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

7/12/95 (305) 570-9999