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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham •

Secretary of State DIVISION OF CORPORATIONS

95000027223

Seachean USA inc

FILED May 20 1997 8:00am Secretary of State

| | ediccia,, no | ,, ,,,, | | | | | • | |
|--|--|---|-----------------------------|---------------------------------------|---|---|----------------|---------------|
| Principal Plac | ce of Business | Mailing Address | ···· | | | | | |
| | 1 South USI | | | | | | | |
| FORT | Pierre Fl. | | | | | | | |
| FORT Pierce, Fl 34982 | | | | | 3. Date Incorporated or Qualified 4 - 6 - 95 4. FEI Number Applied For | | | |
| 2. Principal Place of Business 21 324/ South US / 26 Same. | | | | | 4. FEI Number Applied For 65-0575878 Not Applied For | | | |
| Suite, Apt. #, etc. 22 | | | | | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | |
| | | | | | Election Campaign Fir Trust Fund Contribution | , , , , , , , , , , , , , , , , , , , | | |
| Zip | Country | Zıp | Countr | у | 8. This corporation has ti | | | . 199.032, |
| 24 | 25 | 29 | 30 | | Florida Statutes | Yes [| | |
| | 9. Name and Address of Current | | | Т.: | 10. Name and Address of | I New Registered | Agent | |
| buer | eman Kostypev BLIO. | | 81 | Name & | same | | | |
| | | | 82 | Street Ad | Jess P.O. Box Number is Hot | Acceptable) | | |
| 0.0 | - 10 | | | 3214 | 1 South US | <u>/</u> | | |
| sce. | RL.10. | | 83 | FIOR | t. Pierce | | | |
| | Va. | | 84 | City | o rovo | | 85 Zin (| Code - |
| | | | | J, | | FL | . 34 | 1982 |
| 11, Pursuant | to the provisions of Sections 607 0502 | and 607.1508, Florida Statute | s, the abov | e named co | rporation submits this statemer | it for the purpose of | Changing it | is registered |
| agent la | registered agent, or boat; in the State of amiliar with and accept the obligation | bit Florida: Such Change was a lions of, Section 607,0505, Flo | rida Statute | y me corpor s | allon's board of directors. Then | aby accept the apo | iointment as | registered |
| . SIGNATURE | - Come | s buern | nan l | COSTUR | ew-President | . 4-4- | 97 | |
| . SIGNATURE | Signature, typed or printed name of registered aging | and title if applicable (NOTE | Registered Ag | ent signata req | uired wher reinstatir g) | DATE | , | |
| 12. | OFFICERS AND | DIRECTORS | 13. | | ADDITIONS/CHANGES | TO OFFICERS AND | DIRFCTOR | RS IN 12 |
| TITLE | PRESIDENT, | ☐ DELETE | 11 TITLE | | | | Change | Addition |
| NAME | Gueoman Kosty | Rev | 12 NAME | | | | | |
| STREET ADDRESS | 3343 5W Mr Mill. | in st | 13 STREET | ADDRESS | | | | |
| CITY - ST- ZIP | Guerman Kosty 3343 5W Me Mull Poet 31 duck, Fi | 34953 | 14 CITY-5 | ST - ZIP | | | | |
| TITLE | | DELETE | 2 1 1ITLE | | ······································ | | Change | Addition |
| NAME | | | 2.2 NAME | | | | | |
| STREET ADDRESS | | | 2.3 S1R(F) | 1 ADDRESS | | | | |
| CITY-ST-ZIP | | | 2 4 CITY- | ST-ZIP | | | | |
| TITLE | | DELETE | 3 1 1ITEF | | | 7 | Change | Addition |
| NAME * | | | 3.2 NAME | | | | _ | |
| STREET ADDRESS | | | 3.3 STR(() | ADDRESS | | | | |
| CHTY-ST-ZIP | | | 3 4 CI*Y- | | | | | |
| TITLE | | ☐ DELETE | 411111 | | | | Change | Addition |
| NAME | | | 4. 2 NAME | - | | | | |
| STREET ADDRESS | | | 43 STREET | ADIDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CHY - S | | | | | |
| TITLE | | DELETE | 5.1 TITUE | 2 !" | | *************************************** | Change | Addit on |
| NAME | | <u> </u> | 5.2 NAME | | 10000 | 21992 | | |
| STREET ADDRESS | | | 5.3 STREET | P P P P P P P P P P P P P P P P P P P | 1 0 0 0 0 0; -06/03/97 | <u>กำการ</u> ก | 31 | |
| CITY-ST-ZIP | | | 4 | 1 | ***165.00 | 01010 0 | ₩ 4 | |
| TITLE | | DELETE | 5.4 CITY - 9 6.1 TITLE | 11 417 | | | Change | Add tion |
| NAME | | Engl Otterit | 6 2 NAME | | | | | 5 S |
| STREET ADDRESS | | | 63 STREET | ADDRESS | | | | |
| | | | | | | | 5/ | 120/97 |
| CITY-\$T-ZIP | by certify that the information supplied | with this filling done not qualify | 64 CITY - S | | ed in Section 110 07/21/it Flores | to Statuton I hadron | r contituation | lb.o. |
| informatio Lam an o | by cer tify that the information supplied in indicated on this annual report or sulficer or director of the corporation or to Block 12 or Block 13 if <u>changed</u> , or a | pplemental annual report is tra he receiver or trustee empowe | ue and accu ered to exec | urate and tha | at my signature shall have the s | same tegal effect as | at made und | der oath: tha |

bulkman Kostykw 4-4-97 (5-61) 336-9622