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FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000027223 (3)

1. Corporation Name

SEACLEAN USA, INC.

Principal Place of Business

Mailing Address

3241 SOUTH U.S. 1
FORT PIERCE FL 34982
US

3241 SOUTH U.S. 1
FORT PIERCE FL 34982
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1995

4. FEI Number

65-0575878

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 3343 SW McMullen St

2a. Mailing Address

26 3343 SW McMullen St

Suite, Apt. #, etc.

22 Port St. Lucie, FL

Suite, Apt. #, etc.

27 Port St. Lucie, FL

City & State

City & State

23

28 34953

Zip

Country

24 34953

25 USA

Zip

Country

29

30 USA

9. Name and Address of Current Registered Agent

GUERMAN KOSTYREV
3241 SOUTH U.S. 1
FORT PIERCE FL 34982

10. Name and Address of New Registered Agent

81 Name

GUERMAN Kostyrev - same

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

3343 SW Mc Mullen St.

83

Port St. Lucie

84 City

FL

85 Zip Code

34953

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

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

GUERMAN Kostyrev - PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

01/24/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

P
NAME KOSTYREV, GUERMAN
STREET ADDRESS 3343 S.W. MC MULLEN ST.
CITY-ST-ZIP PT. ST. LUCIE FL 34953

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE

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

GUERMAN Kostyrev

01/24/98

(FC) 3343 SW 33

CR2E034 (10/97)