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

DOCUMENT # P95000052339 (5)

SEYKA, INC.

STREET ADDRESS

CITY-S1-7IP

Principal Place of Business Mailing Address 3826 LAKESHORE DRIVE 3826 LAKESHORE DRIVE								
PALM HARBOR			M HARBOR FL 34884					
						3. Date Incorporated or Qualifie	d 3a. Date of Last Report	
				······································		07/07/1995	06/17/1996	
	lace of Business		Mailing Address			4. FEI Number	Applied For Not Applicable	
Suite, Apt	# elc	26	Suite, Apt #, etc.	··		59-3322947	CR 75 Additional	
22		27	} , ·			5. Certificate of Status Desired	Fee Required	
City & State	0		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
<i>Z</i> ір гэээ	Country		Zip	\vdash	untry		or Intangible tax under s. 199.032, No	
24	25 9. Name and Address of Cur	29 rent Registr	ered Anent	30	<u> </u>	Florida Statutes 10. Name and Address of New		
TUE		.			81 Name		T	
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE					99 (100) Add	ELCUK SEYREK ess (P.O. Box Number is Not Accep	totale)	
	RAL GABLES PL 33134		82 Stre		Street Addr	26 LAKE SHORE	EDRIVE	
					83			
-					84 City		85 Zip Code	
		2500 1 60	3 4500 Fly dd 000		PF	HIT HAKBOR	FL 34684	
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the St	ate of Florida	a. Such change was	nes, trie a authorize	d by the corporat	ion's board of directors. I hereby ac	te purpose of changing its registered cept the appointment as registered	
ł	m familiar with and accept the ob	oligations of,	Section 607.0505, F	iorida Sia	iuies. - SEYR		4/28/97	
SIGNATURE	Signature, typed or polited name of a gistered	agey, and title if	applicable. (NC	TE Registere	d Agent signature requir		DATE	
12.		AND DIREC		13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12	
TiTLE	PSTD		☐ DELET€	1.1 7			Change L Addition	
NAME	SEYREK, SELCUK			1.2 N	[·	
STREET ADDRESS	3826 LAKESHORE DRIVE				TREET ADDRESS			
City - \$1 - ZiP 10'tE	PALM HARBOR FL 34684		DELETE	2.1 7	ITY-SY-ZIP		Change Addition	
NAME			occie	2.2 N				
STREET ADDRESS					TREET ADDRESS			
CHY-SI-ZIP					CITY-ST-ZIP		e e	
Title			DELETE	3.1 T			Change Addition	
NAME				3.2 N	AME			
STREET ADDRESS				3.3 S	TREET ADDRESS			
CITY - ST - 7IP				3.4. (CITY-ST-ZIP			
Dite			☐ DELETE	4.1 T	TLE		Change Addition	
NAME				4.21	NAME			
STREET ADDRESS				4.3 \$	TREET ADDRESS			
CITY - S1 - ZIF				4.4 0	ITY-ST-ZIP			
Tille			☐ DELETE	5.1 T	TLE		Change Addition	
NAME				5.2 N	AME			
STREET ADDRESS				5.3 \$	TREET ADDRESS			
CITY ST-ZIP				5.4 C	ITY-ST-ZIP			
TITLE			DELETE	6.1 T			Change Addition	
NAME				6.2 N	AME			

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.

FILED

May 09 1997 8:00am

Secretary of State