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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600006200 (5)

14. If do hereby certify that the information supplied with this filing does not information indicated on this arm all report or supplemental annual report am an officer or director of the curporation or the receiver or trustee en appears in Block 12 or Block 13 if ther god, or on an attachment with a

SIGNATURE:

SEAGATE VENTURES, LTD., CORP.

Principal Place	of Rusinass	Mailing Address			·····			
Principal Place of Business 1500 N.W.107TH AVENUE SUITE 200 MIAMI FL 33172		·	1500 N.W.107TH AVENUE SUITE 200					
						3. Date Incorporated or Qualified 01/19/1996	3a, Date of Las	t Report
2. Principal Pr	ace of Business	2a. Mailing Address	2a. Mailing Address			4, FEI Number	V	Applied For
21		26						Not Applicable
Suite, Apt. # etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	5 Additional Required
City & State		City & State				6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution		ed to Fees
Zip	Country	Ziρ	}ı	Country		8. This corporation has liability for		r s. 199.032,
24	25	[29]	30				Yes No	
ni in	g, Name and Address of Currer	nt Hegistered Agent	***************************************	81	Name	10. Name and Address of New Re	gistered Agent	
	NS, RICHARD ) A.W. 107TH AVE.							
	E 200		82 Street Add			dress (P.O. Box Number is Not Acceptat	ole)	
MIAN	M&L 33172			83				
	7			B4	City		85 Z	ip Code
				•	Only		FL 👸	
11, Pursuant t	o the provisions of Sections 607,050 pointered agent, or both, in the State	12 and 607.1508, Florida State of Florida State	utes, the at	oovê d by	-named cor the corpora	rporation submits this statement for the pation's board of directors. I hereby accel	ourpose of changing	g its registered as registered
agent I ar	n familiar with, and accept the oblig	ations of, Section 607.0505, I	Florida Stat	utes	i,	ation's board of directors. I hereby accep		
SIGNATURE		A CALL CONTRACTOR OF THE CONTRACTOR OF THE CALL CONTRACTOR OF THE CA	OTE Durinten		nt signal was some	dead when released to a	DATE	
12.	Signature, typed or printed name of registered age OFFICERS AN		13.	Age	п ырпасле тедс	ulred when reinstating)  ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TOLE	D	DELETE	1.1 1)	TLE		NOTION OF PARTIES	Chang	
NAME	LEAL, SILVIO A		1.2 N					
STREET ADDRESS	14440 S.W. 85TH AVENUE		1.3 ST	REET	ADDRESS			
CITY ST 7/F	MIAMI FL 33158		1.4 01	TY-S	T-ZIP			į
TILE	D	☐ DELETE	21 Ti	TĻE		F.y.	Chang	ge Addition
NAME	LEAL, DEE A		22 N/	AME	' l			
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CHY S1-ZIP	MIAMI FL 33158		2.4 C	ITY-S	T-ZIP			<u>,</u>
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NAME			4. 2 N					
STREET ADDRESS			f		ADDRESS		٨	ł
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STREET ADURESS					ADDRESS			1111VMF/
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711LE		☐ DELETE	6.1 11		1 411		□Idnaho	je Addition
NAME			6.2 N			50000214 -04/21/9?011	9535	
STREET ADDRESS					ADDRESS	-04/21/97011	33037	
CHY ST YE	<b>C</b>		64 CI		i	***165.00		

ddress.

ICER OR DIRECTOR

ualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the is true and accurate and that my signature shall have the same legal effect as if made under oath, that powered to execute this report as required by Chapter 607, Florida Statutes; and that my name