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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 10 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000037156 (2)

THE SEEKER OF THE LIGHT, INC.

Principal Place of Business Mailing Address 6340 S.W. 104TH STREET 6340 S.W. 104TH STREET MIAMI FL 33156 MIAMI FL 33156-3310 3. Date Incorporated or Qualified 3a. Date of Last Report 04/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0662698 21 Not Applicable Suite. Aut. #. ctc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SOTORRIO, RENE A 1001 SOUTH BAYSHORE DRIVE Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE 2706** 83 MIAM! FL 84 City Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE group. Specifier printed halps of registering agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 **PSTD** DELETE THU 1.1 TITLE Change MOLINI, DENISE NAME 1.2 NAME 6340 S.W. 104TH ST. SYRELL ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33156** CITY - 5.1 - ZIP 1.4 CITY-ST-ZIP  $T(\Gamma_i)F$ □ DELETE Addition 2 1 TITLE ☐ Change NESBITT, TANA NAME 22 NAME 6340 S.W. 104TH ST. STREET ADDRESS 23 STREET ADDRESS **MIAMI FL 33156** 2 4 CITY-ST-ZIP CHY ST-201 DELETE THUE 31 TITLE Change Addition NAME 32 NAME STREET ADDRESS **3.3 STREET ADDRESS** CHY 51 72 34. CITY-ST-ZIP DELETE THE 4 1 TITLE Change Addition NAME 4 2 NAME STREET ANDRESS 4.3 STREET ADDRESS 011Y+\$1-26 4.4 CITY-ST-ZIP DELETE Change THEF 51 TITLE Addition NAME 5 2 NAME STREET AUDRESS **5.3 STREET ADDRESS** CITY SE 703 54 CITY - ST-ZIP DELETE 1007 Change Addition 61 TITLE 62 NAME STREET AFORESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP

14. Ide 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 and cated 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 eath; 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

13 if changed, or on an attachment with an address