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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000067838

1. Corporation Name

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90222 035 ***150.00

SEA FOF	REVER, INC.									
Principal Place	e of Business	Mailing Address					j indiind) isa jasta betis maisi na:	30	.114 10091 10160	11481 1811 1881
2809 NE 35TH COURT FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308			0 8	18			DO NOT WRI	E IN THIS S	SPACE	
							3. Date Incorporated or Qualifed 08/13/1996			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number 65-0690315		<u> </u>	plied For t Applicable	
. Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	 	
City & State	e	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	· 1	
Zip	Country	Zip Coun			untry		This corporation owes the curr Personal Property Tax.	ent year Inta	ingible	□No
24	25 29 9. Name and Address of Current Registered Agent		30			10. Name and Address of New F	legistered A			
	9. Name and Address of Curren	Registered Agent		81	Name		IV. realite and Addition of them.			
LOUGHRAN, DONALD 7522 WILES ROAD				82	Street A	Address	s (P.O. Box Number is Not Accepte	ble)		
STE 102			-	83						
CORAL SPRINGS FL 33067			-	84	City		AND SOUTH THE PARTY OF THE PART		85 Zip C	Code
•				11'				<u>FL</u>		
office or n	to the provisions of Sections 607.050; egistered agent, or both, in the State in familiar with, and accept the obligat	of Florida, Such change was all ions of, Section 607,0505, Flor	utnonzeo rida Statu	tes.	tne corpor	rauons	s board of directors. I hereby acception reinstating)	t the appoin	tment as rec	gisiered
40	3.9.2.2.2.1			Ayen	t Signature rec	dollen Mi	ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	D DEI		13.				ADDITIONS/OFFACEO 18 61	TOLING THE	☐ Change	Addition
NAME	_		1.2 NA	ME						
STREET ADDRESS	2809 NE 35TH COURT		1.3 STREET ADD		ADDRESS					
CITY-ST-ZIP	FORT LAUDERDALE FL 33308		1.4 CIT	.4 CITY-ST-ZIP						
TITLE			2.† TIT	Œ					☐ Change	Addition
NAME	TIMOO, MATIA		2.2 NA	ME						ł
STREET ADDRESS	LEOUS, M.L. 00 COOMIL				ADDRESS	. "	المن عاليا المالية			
CITY-ST-ZIP	T T D TO DE TE COURT		2. 4 CI		T-ZIP		<u> </u>		☐ Change	Addition
TITLE			3.1 TITI 3.2 NAI							<u> </u>
NAME					ADDRESS					l
STREET ADDRESS					T-ZIP					1
CITY-ST-ZIP	- 11-7-	☐ DELETE	4.1 TIT		1-21				☐ Change	☐ Addition
NAME			4. 2 NA	ME	İ					
STREET ADDRESS			4.3 STI	REET	ADDRESS					
CITY-ST-ZIP			4.4 CIT	Y- \$1	r-ZIP					
TITLE			5.1 TIT	-					☐ Change	Addition
NAME			5.2 NA	ME						
STREET ADORESS	-		5.3 STI	REET	ADDRESS					
CITY-ST-ZIP		······································	5.4 CIT		T-ZIP					
TITLE		☐ DELETE	6.1 TIT						☐ Change	☐ Addition
NAME				NAME STREET ADDRESS						
	İ		■ 63 ST	REET	ADDRESS !					I .

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, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE: MULTIPO