

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000099095

1. Entity Name
SEOLA II, INC.

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90080 024 ***150.00

Principal Place of Business
6400 N ANDREWS AVENUE
FT LAUDERDALE FL 33309

Mailing Address
6400 N ANDREWS AVENUE
FT LAUDERDALE FL 33309

2. Principal Place of Business
300 SE 2nd St.
Suite, Apt. #, etc.

3. Mailing Address
300 SE 2nd St.
Suite, Apt. #, etc.

City & State
Ft. Lauderdale, FL
Zip 33301 Country

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Zip 33301 Country

4. FEI Number 65-0714108

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUKE, BRYAN
6400 N ANDREWS AVE
FT LAUDERDALE FL 33309

Name PATRICIA JONES

Street Address (P.O. Box Number is Not Acceptable)
c/o Stiles Corp.

300 SE 2nd St.

City Ft. Lauderdale, FL Zip Code 33301

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Patricia Jones*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/21/01
DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete
NAME STILES, TERRY W
STREET ADDRESS 6400 N ANDREWS AVE
CITY-ST-ZIP FT LAUDERDALE FL

TITLE DP ☒ Change ☐ Addition
NAME STILES, TERRY W.
STREET ADDRESS 300 SE 2nd St.
CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE VT ☐ Delete
NAME EAGON, DOUGLAS P
STREET ADDRESS 6400 N ANDREWS AVE
CITY-ST-ZIP FT LAUDERDALE FL

TITLE VT ☒ Change ☐ Addition
NAME EAGON, DOUGLAS, P.
STREET ADDRESS 300 SE 2nd St.
CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE V ☐ Delete
NAME PALMER, STEPHEN R
STREET ADDRESS 6400 N ANDREWS AVE
CITY-ST-ZIP FT LAUDERDALE FL

TITLE V ☒ Change ☐ Addition
NAME PALMER, STEPHEN R.
STREET ADDRESS 300 SE 2nd St.
CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE VS ☐ Delete
NAME JONES, PATRICIA
STREET ADDRESS 6400 N ANDREWS AVE
CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE VS ☒ Change ☐ Addition
NAME JONES, PATRICIA
STREET ADDRESS 300 SE 2nd St.
CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE V ☐ Delete
NAME STINE, JAMES W
STREET ADDRESS 6400 N ANDREWS AVE
CITY-ST-ZIP FT LAUDERDALE FL

TITLE V ☒ Change ☐ Addition
NAME STINE, JAMES W.
STREET ADDRESS 300 SE 2nd Ave.
CITY-ST-ZIP Ft. Lauderdale, FL 33301

TITLE V ☐ Delete
NAME FERRERA, ROCCO
STREET ADDRESS 6400 N ANDREWS AVE
CITY-ST-ZIP FT LAUDERDALE FL

TITLE V ☒ Change ☐ Addition
NAME FERRERA, ROCCO
STREET ADDRESS 300 SE 2nd St.
CITY-ST-ZIP Ft. Lauderdale, FL 33301

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patricia Jones*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Patricia Jones

2/21/01 954/628-9300
Date Daytime Phone #

CR2E034 (10/00)

Attachment

835727

UNIFORM BUSINESS REPORT

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:	V	Addition
NAME:	O'SHEA, DENNIS F.	
STREET ADDRESS:	300 SE 2 nd St.	
CITY-ST-ZIP:	Ft. Lauderdale, FL 33301	