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

.PROFIT **CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P96000099449 (6)

SEAGA	ITE GENERAL STORE, INC.				
Principal Plac	ce of Business	Mailing Address		T I DECIDE OF THE FRAME SOURCE OF THE SOURCE	
18679 SE FEDERAL HIGHWAY TEOUESTA FL 33649 US		18679 SE FEDERAL HIGHWAY TEOUESTA FL 33649 US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				12/06/1996	
<b></b>	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		[26]		65-0713104	Not Applicable
Suite, Apt.	. ₩, <b>Θ</b> (C.	Suite: Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat		City & State	<del>-</del>		Fee Required
<b>⊢</b>	io	- h ¬		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	<b>28</b> ]	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	<ol><li>This corporation owes or has paid the of Personal Property Tax due June 30.</li></ol>	current year Intangible
27	9. Name and Address of Curren		130]	10. Name and Address of New Registere	
DII			81 Name		
RUBENFIELD, DAREN E 18679 SE FEDERAL HIGHWAY				RUBENFELD, DAREN ESQ.	
			82 Street A	Address (P.O. Box Number is Not Acceptable)	
'6'	QUESTA FL 33649		83	100,000,000	
			84 City	F	85 Zip Code
11. Pursuant office or	to the previsions of Sections 607.050; registered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida, Such change was a	os, the above-named o	corporation submits this statement for the purpose oration's board of directors. I hereby accept the a	<del></del>
· .	am lamiliar with, and accept the obliga	itions of, Section 607,0505, Fig	rida Stalutes.		
SIGNATURE	Signature, typod or proted name of registered agei	of and title if apply able (NOTE	: Registered Agent signature re	required when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PS	☐ DELETE	1.1 TITLE		Change Addition
NAME	MILLER, ROBERT L		1.2 NAME		
STREET ADDRESS	18679 SE FEDERAL HIGHWAY	<b>Y</b>	1.3 STREET ADDRESS		
CITY-ST-ZIP	TEQUESTA FL		1.4 C(1Y-S1-Z(P		
TITLE	Vτ	DELETE	2.1 TITLE		Change Addition
NAME	ZBORIL, JIM		2.2 NAME		
STREET ADDRESS	18679 SE FEDERAL HIGHWAY	<b>'</b>	2.3 \$1REET ADDRESS		
CITY-ST-ZIP	TEQUESTA FL		2. 4 CITY - ST - ZIP		
TITLE	V	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	RUBENFIELD, DAREN E		3.2 NAME	RUBENFELD, DAREN ESQ.	
STREET ADDRESS	18679 SE FEDERAL HIGHWAY	1	3.3 STREET ADDRESS		
CITY-ST-ZIP	TEQUESTA FL		3.4. CITY- \$1-ZIP		
TITLE	V	DELETE	4.1 TITLE		Change Addition
NAME	AUSTIN, CHRISTOPHER		4. 2 NAME		
STREET ADDRESS	18679 SE FEDERAL HIGHWAY	1	4.3 STREET ADDRESS		
CITY-ST-ZIP	TEQUESTA FL		4.4 CITY-S1-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		• •
STREET ANDRESS			22 STREET ADDRESS		

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 of 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 attaching it with an address 4/20/98

**FILED** 

May 15 1998 8:00am

Secretary of State