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

Mailing Address

MIAMI FL 33138

2a. Mailing Address

City & State

28

29

Suite, Apt. #, etc.

1001 NORTHEAST 88 STREET

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF COHPORATIONS

DOCUMENT # P97000015106 (2)

Country

25

7 SEAS SAFETY, INC.

Principal Place of Business

MIAMI FL 33138

21

22

23

24

1001 NORTHEAST 88 STREET

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

FILED
Apr 23 1998 8:00am
Secretary of State

	DO NOT WRITE IN THIS S	SPACE						
3.	Date Incorporated or Qualified							
	02/17/1997							
4.	FEI Number	Applied For						
	NOT APPLICABLE	X Not Applicable						
5.	Certificate of Status Desired	\$8.75 Additional Fee Required						

8. This corporation owes or has paid the current year Intangible

\$5.00 May Be

Added to Fees

Yes

6. Election Campaign Financing

Personal Property Tax due June 30.

Trust Fund Contribution

		ig. thanks and readings of from the ground or region.			
AMERILAWYER CHARTERED	81	Name			
343 ALMERIA AVENUE CORAL GABLES FL 33134	82	Street Address (P.O. Box Number is Not Acceptable)			
	83				
	84	City FL 85 Zip Code			

Country

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, and accept the obligations of, Section 607.0505, Florida Statutes.

-	an terminer with, and nesept the congritors in, se	. (IOI) 007.0000, I IC	inda oratatos.			
SIGNATURE		dicable (NOTE	Registered Agent signature require	ud when reinstating)	DATE	
12.	OFFICERS AND DIRECTOR	13.	ADDITIONS/CHANGES TO OF	ICERS AND DIRECTOR	IS IN 12	
TITLE	PTD	DELETE	1 1 TITLE		☐ Change	Addition
NAME	YIM MUI CHU, ANDY		12 NAME			
STHEFT ADDRESS	1001 NORTHEAST 88 STREET		1.3 STREET ADDRESS			
CITY-ST-7IP	MIAMI FL 33138		1.4 CITY-ST-ZIP			
TITLE	VSD	DELETE	21 TITLE		Change	Addition
NAME	VENOY, LAURI M		2.2 NAME			
STREET ADDRESS	1001 NORTHEAST 88 STREET		2.3 STREET ADDRESS			
CITY - ST - ZIP	MIAMI FL 33138		2 4 CITY-ST-ZIP			
TITLE		DELETE	3 1 TITL(☐ Change	■ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - ST - ZIP			3.4 CITY - ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TIBLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
City - St - ZiP			5.4 CITY - S1 - ZIP			
TITLE		☐ DELETE	61 TIPLE		☐ Change	Addition
NAME			6 2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			

14. Thereby 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 supplieriental annual report is true and accurate and that my signature shall have the same legal effect as if made under ooth, 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 at the an adjustment with an address.

SIGNATURE:

415/98

(305)759-3821