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 # P97000086198

1. Corporation Name SETHCO, INC.

HOLLYWOOD FL 33020

2831 WILEY ST

Principal Place of Business

Mailing Address

2831 WILEY ST

HOLLYWOOD FL 33020

May 06, 1999 8:00 am Secretary of State

05-06-1999 90236 044 ***158.75



DO NOT WRITE IN THIS SPACE

	•				10/06/1997		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Αρ	plied For
21		26			65-0796256	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22		27			5. Certifcate of Status Desired	Fee Re	quired
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	p Counti		8. This corporation owes the current year Intang	gible	
24	25	29 30	ī]		Total Troporty Tax.	Yes	13No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Ag	jent	
				Name			Ï
PIPKIN, EDWARD F				2 Street Ac	ddress (P.O. Box Number is Not Acceptable)		
2831 WILEY ST				0.,000,			
HOLLYWOOD FL 33020				3			
1	•		84	1 Cit		85 Zip (Code
ı	•		*	4 City	FL }	65) Zip (3000
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligat	of Florida. Such change was auth	orized b	y the corpora	orporation submits this statement for the purpose of chation's board of directors. I hereby accept the appointment	ianging its nent as re	gistered
SIGNATURE	Signature, typed or printed name of registered ager	at and title if applicable. (NOTE: Re-	gistered Ag	ent signature req	uired when reinstating) DATE		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND		_
TITLE	PD .	☐ DELETE	1.1 TITLE		L	Change	Addition
NAME	PIPKIN, KEITH J	TO THE MISSIFIED	1.2 NAME		-14 AT		;
STREET ADDRESS	2831 WIELY ST — A	DOLESS MISSISSES	1.3 STRE	ET ADDRESS	2831 WILEX ST		i
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.4 CITY-	ST-ZIP			
TITLE	CV □ DELETE 2		2.1 TITLE			Change	☐ Addition
NAME	PIPKIN, EDWARD F		2.2 NAME	: }			
STREET ADDRESS	2831 WILEY ST		2.3 STRE	ET ADDRESS			
CITY-ST-ZiP	HOLLYWOOD FL 33020		2. 4 CITY	ST-ZIP	•	_	
TITLE		☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME	:)			'
STREET ADDRESS	٤		3.3 STRE	ET ADDRESS			
CITY-ST-ZIP		İ	3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4, 2 NAM	<u> </u>			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE	,	DELETE	5.1 TITLE		[Change	☐ Addition
NAME			5.2 NAME	:	•		
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME		_	6.2 NAME	:		-	
STREET ADORESS.			6.3 STRE	ET 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 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 an attact ment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

RE EDWALDRE [DIPKIN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR