


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 31, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000082882  
 1. Entity Name  
 SEQUEIRA SERVICES INC.



Principal Place of Business  
 1422 SW 118 AVE  
 MIAMI, FL 33184

Mailing Address  
 1422 SW 118 AVE  
 APT 1  
 MIAMI, FL 33184

**DO NOT WRITE IN THIS SPACE**



03132004 No Chg-P CR2E034 (10/03)

4. FEI Number  
 65-0866257 Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
 SEQUEIRAS, PERLA  
 1422 SW 118 AVE  
 MIAMI, FL 33184

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

000000093357  
 03/31/04-80002-016 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SEQUEIRA, PERLA 1422 SW 118 AVE MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SEQUEIRA, LAZARO M 1422 SW 118 AVE MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. *PERLA SEQUEIRA*

SIGNATURE: *Perla Sequeira* PRESIDENT 03/17/04 (305) 207-7614  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #