FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						FILED		
COF ANNU	PROFIT RPORATION JAL REPORT 1998	F	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Jan 15 1998 8:00am Secretary of State			
		20				Secretary	y 01 S	iaie
	MENT # \$2843		(0)					
SEA G	arden by the sea, inc	•					eit Beber Broil B ro fi Si	NII N INII 1002
Principal Place	e of Business	Mailing A	ddress				BIS NEWER BENEFI DENIE BIS	
3421 NW 32 WAY 3421 NW 32 WAY								
FT LAUDERDALE FL 33309 FT LAUDERDALE FL 3330 US US						DO NOT WRITE IN	THIS SPACE	
						3. Date Incorporated or Qualified		
		0- 14-99-	- 6-14-000			01/29/1991 4. FEI Number		applied For
2. Principal P	ace of Business	26 Wallin	g Address			65-0246473		lot Applicable
Suite, Apt.	#, etc		Apt. #, etc.			5. Certificate of Status Desired	→ \$8.75	Additional
22	···	27	State		···-			Required
City & State	3	28	Sidle			6. Election Campaign Financing Trust Fund Contribution	_) May Be I to Fees
Zîp	Country	Zip		Country	,	8. This corporation owes or has paid to		_ ~
24	25	29	3	<u>ol</u>		Personal Property Tax due June 30 10. Name and Address of New Regis		No
	9. Name and Address of Curr	ent Hegistered /	Agent	81	Name	10. Name and Address of New Regis	icieu Agein	
	Pierre, rejean 20 w. oakland park blvd.,	RI DG G		L_		(C.O. Co. Alicabas in Nat. Accountable)		·····
	NRISE FL 33351	DEDG G		82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
				83				
				84	City		FL 85 Zip	Code
11 Pursuant	to the provisions of Sections 607.0	502 and 607,150	8. Florida Štatutes	, the above	e-named corr	poration submits this statement for the purp	oose of changing	its registered
office or r	egistered agent, or both, in the Stam familiar with, and accept the obline	ite of Florida, Suc	ch change was aut on 607.0505. Florid	thorized by da Statute	y the corporal s.	poration submits this statement for the purp clon's board of directors. I hereby accept the	ne appointment a	s registered
SIGNATURE								
12.	Signature, typed or printed name of registered :	agent and title if applica		Registered Age	ent signature requi	red when reinstaling) ADDITIONS/CHANGES TO OFFICER	DATE S AND DIRECTO	RS IN 12
TITLE	PSTD	IND BINZOTONIO	DELETE	1.1 TITLE		, 1001110100,0117411010	Change	
NAME	TESSIER, FERNAND			1.2 NAME				
STREET ADDRESS	3421 NW 32 WAY			1.3 STREET				
CITY-ST-2IP	FT LAUDERDALE FL		DELETE	1.4 CITY - 9 2.1 TITLE	ST-ZIP		Change	Addition
TITLE NAME			E pereir	2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS		. 0	
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP			
TITLE			DELETE	3.1 TITLE			☐ Change	Addition
NAME				3.2 NAME	ADODECC			
STREET ADDRESS				3.3 STREET	ADDRESS			
CITY - ST - ZIP TITLE			DELETE	4.1 TITLE	JI ZAIT		Change	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP				4.4 CITY - 8	ST-ZIP			Addition
TITLE			DELETE	5.1 TITLE			L Change	L Addition

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 on an attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

5.3 STREET ADDRESS

Change

Addition

5.4 CITY-ST-ZIP

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

City-ST-ZIP

SIGNATURE: FALLEN NO TESTICA 1-5-98 154-749-8802