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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S56356**

1. Corporation Name

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90028 037 ***150.00

SEADHE	EZE PRODUCTIONS, INC.					1 (88) (81) \$ (8) \$110 B (108 1118 1118 1118	in diti niali Sin) 6(6)) 6(6 (4		
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Principal Place	of Business	Mailing Address) (40)(14)0 (0) 0:110 01448 (156) 0111	IN MITT BINTI NIO		BIBIT BIBIT 1881	
2007 PASS-A-GI	RILLE WAY	2007 PASS-A-GRILLE W								
ST PETERSBURG BEACH FL 33706 ST PETERSBURG			IG BEACH FL 33706			DO NOT WRITE IN THIS SPACE				
					3.	Date Incorporated or Qualifed				
						05/28/1991				
2. Principal Pl	lace of Business	2a. Mailing Address				FEI Number		A	oplied For	
21		26				59-3070108			ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5.	Certificate of Status Desired		-	Additional	
22		27							equired	
City & State	6	~ City & State - • • •	Total services and the			Election Campaign: Financing Trust Fund Contribution		-	*May Be = # ் to Fees	ا ت
Zip	Country	28 Zip	Cou	untry		This corporation owes the curre	nt year Inter		10 1 663	
24	25	29	30	,	0.	Personal Property Tax.] Yes	□No	
24	9. Name and Address of Curren				10.	Name and Address of New R	egistered A	gent		
				81 Name						
	z, stanley			82 Street	Address (P	O. Box Number is Not Acceptal	ble)			
)8 GULF BLVD.			02 0000	, 100,000 (,					!
RED	INGTON BEACH FL 33708			83						ł
, i				84 City			FL	85 Zip	Code	
,	to the provisions of Sections 607.050	0 COZ 4500 Florido St	atutas the s	boyo pomod	corporation	eubmite this statement for the r	numose of c	nanging its	registered	
affina ar r	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change Wa	is authorized	n nv tne como	oration's bo	pard of directors. I hereby accept	t the appoint	ment as re	egistered	
SIGNATURE		A and did at any limble //	IOTE: Bagistares	d Agent signature r	required when r	ainefativa)	DATE			,
12.	Signature, typed or printed name of registered age	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFF		DIRECT	ORS IN 12	(11/98)
TITLE	PTD	☐ DELETE						Change	Addition	Ξ,
NAME	LUTZ, STANLEY		121	AME						Z
STREET ADDRESS	15708 GULF BLVD.		1.2 N							
CITY-ST-ZIP				TREET ADDRESS						ý L
TITLE	I REDINGTON BEACH FL		1.3 \$	TREET ADDRESS						P2EO
111145	REDINGTON BEACH FL	() DELETE	1.3 S ² 1.4 C	TTY-ST-ZiP				☐ Change	☐ Addition	CROEO
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	REDINGION BEACH FL	[] DELETE	1.3 S 1.4 C 2.1 TI 2.2 N	TTY-ST-ZIP		••••		☐ Change	Addition	CR2E034
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CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

TOURED