FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S81808** **(5)**

1. Corporation Name
SEADY GENERAL TRADE, INC.

Principal Place of Business
7435 SW 33 ST.
MIAMI FL 33155

Mailing Address
P.O. BOX 140488
CORAL GABLES FL 33114

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/20/1991
3a. Date of Last Report: 02/17/1994

2. Principal Place of Business
21 915 NW 1ST AVENUE
22 # 2910
23 MIAMI FLA
24 33136 25 U.S.A.

2a. Mailing Address
26
27 PO. BOX 140488
28 CORAL GABLES FLA
29 33114 30 U.S.A.

4. FEI Number: 65-0284552 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. Does corporation meet criteria of exempt or nonprofit under Florida Statute? ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
SEADY, WILLIAM
7435 SW 33 STREET
MIAMI FL 33115

10. Name and Address of New Registered Agent
81 Name: WILLIAM SEADY
82 Street Address (P.O. Box Number is Not Acceptable): 915 NW 1ST AVENUE
83 # 2910
84 City: MIAMI FL 85 Zip Code: 33136

11. Pursuant to the provisions of Section 607.0505, 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. The street address of the registered office and the name of the registered agent of business in Florida are:

SIGNATURE: WILLIAM SEADY PRESIDENT — APRIL 26TH 95

12. OFFICER AND DIRECTOR

Title	P
Name	SEADY, WILLIAM
Street Address	7435 SW 33 STREET
City, State, Zip	MIAMI FL 33155

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS

Title	P
Name	SEADY WILLIAM
Street Address	915 NW 1ST AV # 2910
City, State, Zip	MIAMI FL 33136

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is correct, I further certify that I am a duly authorized officer or director of the corporation, I further certify that the corporation has paid all fees due to the Department of State, I further certify that I am aware that false information submitted to a public officer or agency is a violation of Section 817.155, Florida Statutes, and that my signature shall have the same legal effect as if made under oath.

SIGNATURE: WILLIAM SEADY P — APRIL 26TH 95 305.372.7655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0206870 CP