

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**APPROVED
AND
FILED**

94 AUG 15 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
ANNUAL REPORT
1994**



FLORIDA DEPARTMENT OF STATE
Jan Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V53892 (8)

1. Corporation Name

SES GROUP BROKERAGE SERVICE, INC.

Mailing Address
**2500 NORTH TAMiami TRAIL
SUITE 112
NAPLES FL 33940**

Principal Place of Business
**2500 NORTH TAMiami TRAIL
SUITE 112
NAPLES FL 33940**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Changed

3a. Date of Last Report

07/27/1992

07/30/1993

4. FEI Number

APPLIED FOR 65-0382819

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

6. Franchise Commission
Exemption Trust
Fees Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status ☐

8. This corporation has liability for intangible tax under S. 199.032.

Florida Statutes ☐ Yes ☐ No

2. Mailing Address

21 9330 Fontainebleau Blvd

2a. Principal Place of Business

26 9330 Fontainebleau Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 2nd Floor

27 2nd Floor

City & State

23 Miami FL

City & State

28 Miami FL

Zip

24 33172

Country

25 Dade

Zip

29 33172

Country

30 Dade

9. Name and Address of Current Registered Agent

**RICE, RONALD G. JR.
2500 NORTH TAMiami TRAIL
SUITE 112
NAPLES FL 33940**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

9330 Fontainebleau Blvd. 2nd

83

84 City

Miami

FL

85 Zip Code

33172

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE

Ronald G. Rice Jr.

Signature (typed or printed name of registered agent and date of signature)

NOTE: Registered Agent must be a resident of the state.

8/9/94

12. OFFICERS AND DIRECTORS

1.1 TITLE

D

1.2 NAME

RICE, MELISSA A.

1.3 STREET ADDRESS

9330 FONTAINEBLEAU BLVD.

1.4 CITY - ST - ZIP

MIAMI FL

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 13.01, 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, director, or the receiver or trustee empowered to execute this report as required by Chapter 222 or Chapter 223, Florida Statutes, and that my name appears in Block 1 or Block 13 of changed, or on another document with an affidavit.

SIGNATURE:

Melissa A. Rice

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/9/94

(30) 228602