FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
Division OF CORPORATIONS

1997

DOCUMENT # M58486

(5)

1. Corporation Name DON FERNANDO FISHMARKET-RESTAURANT, INC. Principal Place of Business 12899 SW 42 ST. MIAMI FL 33175 MIAMI FL 33175					·		
						3. Date Incorporated or Qualified 3a. Date of Last Report 03/05/1996	
2. Principal F 21	Place of Business		2a. Mailing Address 26			4. FEI Number Applied For 65-0103367 Not Applicable	
Suite, Apt	#, etc	Suite, Apt. 4	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required	
City & Stat	le .	City & State	City & State			8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Z(p)			Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
**	g. Name and Address of Curre					10. Name and Address of New Registered Agent	
TARIN, FERNANDO V. 4531 S.W. 132ND AVENUE MIAMI FL 33175				81 82	Name Street A	Address (P.O. Box Number is Not Acceptable)	
				83	City	85 Zip Code	
					-	FL 1	
	to the provisions of Sections 697.05 registered agent, or both, in the Statani familiar with, and accept the obli	502 and 607.1508, Flor le of Florida, Such cha gations of, Section 603	ida Statutes, t nge was autho 7.0505, Florida	he above orized by Statutes	e-named the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signar are typed or printed name of registered a	igent and title if applicable	(NOTE Reg	gistered Age	nt signature	e required when reinstating) DATE	
12.		ND DIRECTORS		13.	······································	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DEL		ELETE	1.1 TITLE		Change Addition	
MAME	APAL ON ABAND ALPHE		1.2 NAM		İ		
STREET ADDRESS 4531 SW 132ND AVENUE			1.3		ADDRESS		
CITY - S1 - ZIP	MIAMI FL 33175		VE) ETE	1.4 CITY-ST-ZIP			
TITEF	· ·		2 1 TITLE		Change Addition		
NAME	TARIN, ANA M. 4531 SW 132ND AVENUE		2.2 NAME 2.3 STREET ADDRESS		1000000		
STREET ADDRESS	MIAMI FL 33175						
CITY - ST - ZIP TITLE	VPD	T 1 r	ELETE	2 4 CITY-S 31 TITLE	i - ZIP	☐ Change ☐ Addition	
NAME	TION FEOUNDS IN		3.2 NAME	1			
STREET ADDRESS	ARRA CITA ARRANGE ALIENTAN		3.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33175			3.4. CITY - 9			
TITLE			DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREET	ADDRESS		
CHY-ST-ZIP			I	4.4 CITY-S	T-ZIP		
TITLE			ELETE	5.1 TITLE		Change Addition	
NAMÉ				5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS		
C(TY - ST - ZIP				5.4 CITY-S	T-21P		
TITLE			DELETE	6.1 TITLE		Change Addition	
NAME	!			6.2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS		
CITY - SI - ZIP	1			6.4 CITY-S	T-ZIP		

14. If do 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 arrival report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the received 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 chapted, or on an address.

SIGNATURE:

CHATTER AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/97

205-279-7960 Daytime Phone

FILED

Feb 19 1997 8:00am

Secretary of State