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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

M58486

(5)

DON FERNANDO FISHMARKET-RESTAURANT, INC.

Principal Place of Business Mailing Address						
12899 SW 42 ST. 12899 SW 42 ST.						
MIAMI FL 33175 MIAMI FL 33175					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
\					09/02/1987	
2. Principal Place of Business 2a. Mailing Add			dress		4. FEI Number Applied For	
21 Suite Ant	26]	A.A. H. A.		65-0103367 Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip Co		У	8. This corporation owes or has paid the current year Intangible	
25 29 9. Name and Address of Current Registered Agent			30		Personal Property Tax due June 30. Yes No	
				Name	10. Name and Address of New Registered Agent	
TARIN, FERNANDO V. 4531 S.W. 132ND AVENUE						
4	AMI FL 33175		63	Street A	Address (P.O. Box Number is Not Acceptable)	
17116	rung 1 E 90 170		8:			
			84	City	85 Zip Code	
			i i	1	FL 1 1	
 Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida 				e-named e	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	eđ d
1	m familiar with, and accept the obl	igations of, Section 607.0505, F	lorida Statute	S.		_
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NC	TE: Registered Ad	ent signature :	required when reinstating) DATE	_
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Additi	ion
NAME	TARIN, FERNANDO V.		1.2 NAME			
STREET ADDRESS	4531 SW 132ND AVENUE		1.3 STREE	T ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL 33175	DELETE	1.4 CITY-	ST-ZIP		
NAME	TARIN, ANA M.	- Deceie	2.1 TITLE 2.2 NAME		L.j Change L.J Additi	ion
STREET ADDRESS	4531 SW 132ND AVENUE			I ADORESS		
CITY-ST-ZIP	MIAMI FL 33175		2.4 CITY	Ī		
TITLE	VPD	☐ DELETE	3.1 TITLE		☐ Change ☐ Additi	ion
NAME	TARIN, FERNANDO, JR.		3.2 NAME	1	- -	
STREET ADDRESS	4531 SW 132ND AVENUE		3.3 STREE	ADDRESS		I
CITY-ST-ZIP	MIAMI FL 33175		3 4. CITY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Additi	ion
NAME			4. 2 NAME			
STREET ADDRESS CITY-ST-ZIP				ADDRESS		
TITLE		DELETE	4.4 CITY -: 5.1 TITLE	31 - ZIP	☐ Change ☐ Additi	ion
NAME		_ v.c	5.2 NAME		L orange L Nouti	"
STREET ADDRESS	•		5.3 STREE	ADDRESS		
CITY-ST-ZIP			5.4 CHY-	1		
TITLE	<u> </u>	☐ DELET E	6.1 TITLE		Change Addition	on [
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 City - 5	T- 2IP		

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 a address.

CIGNATURE.

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BELDINAS THEIN 1/2

1/28/98

FILED

Feb 06 1998 8:00am

Secretary of State