

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000077537	
1. Entity Name JR&S SEAFOOD TRADE, INC	

Principal Place of Business 8671 SW 66 STREET MIAMI, FL 33166	Mailing Address 8671 SW 66 STREET MIAMI, FL 33166
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04292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3707098	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LERENA, CARLOS A 8671 NW 66 STREET MIAMI, FL 33166

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

000000351739
05/02/05-80158-020 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RAMACI, JOSÉ 8671 NW 66 STREET MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LÓPEZ, LIDIA E 8671 NW 66 STREET MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAMACI, MARIA L 8671 NW 66 STREET MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMACI, LUCIANO J 8671 NW 66 STREET MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMACI, YANINA L 8671 NW 66 STREET MIAMI, FL 33166
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *José Ramaci* 4/29/05 305 977 0065
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #