

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2002 8:00 am
Secretary of State

08-01-2002 90169 010 ***150.00

UBR-UBR
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DOCUMENT # P96000009494

1. Entity Name
AQUAFARMING & FISHERIES INTERNATIONAL CORPORATIO
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| Principal Place of Business 17025 W. DIXIE HWY. NORTH MIAMI BEACH FL 33160 | Mailing Address 17025 W. DIXIE HWY. NORTH MIAMI BEACH FL 33160 |
|--|--|



DO NOT WRITE IN THIS SPACE

| | | | | | |
|--------------------------------|---------|---------------------|---------|---|----------------|
| 2. Principal Place of Business | | 3. Mailing Address | | 4. FEI Number 65-0634109 | Applied For |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | Not Applicable |
| City & State | | City & State | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| Zip | Country | Zip | Country | | |

| | | | |
|---|--|--|--------------------------|
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| KERBEL, LEE JOHN 424 POINCIANA ISLAND DRIVE MIAMI FL 33160 | | Name <i>Lee W. Kerbel</i> | |
| | | Street Address (P.O. Box Number is Not Acceptable) <i>100 Bayview Drive #1228</i> | |
| | | City <i>Miami Beach</i> | FL Zip Code <i>33160</i> |

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.

SIGNATURE DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| | | |
|---|---|--|
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/> | FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|--|

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P KERBEL, LEE JOHN 100 BAYVIEW DRIVE #1228 MIAMI FL 33160 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V GOMES, LUIZ A 10275 COLLINS AVE APT. 11045 BAL HARBOUR FL 33154 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *Feb 30, 2002* *(305) 8975347*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)



Attachment Ser. # P5600009494
Aquafarming & Fisheries International, Corp.



Tel (305) 947 5347 / Fax (305) 947 5348

676241

17025 West Dixie Highway, North Miami Beach, Florida 33160, USA

email: eaquafarm@aol.com

JULY 30, 2002

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALAHASSEE, FL 32302-1500

REF: UBR

TO WHOM IT MAY CONCERN,

OUR COMPANY RECEIVED THE UBR FORM AND FILING FEE ANNOUNCEMENT ON 24 JULY. A CALL WAS PLACED IMMEDIATELY TO THE DIVISION OF CORPORATIONS. WE INFORMED MR. ROB BROWN OF YOUR OFFICE OF THIS SITUATION AND OUR CONCERN REGARDING THE PENALTY.

WE WERE TOLD TO INFORM YOUR OFFICE OF THIS IN WRITING AND THAT THE PENALTY WOULD BE WAIVED.

THEREFORE WE ARE ATTACHING THIS LETTER TO OUR PAYMENT AND THANKYOU FOR YOUR ASSISTANCE.

SINCERELY,

AQUAFARMING & FISHERIES INTERNATIONAL CORPORATION


LEE J. KERBEL, DIRECTOR