Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700009183

1. Corporation Name

Principal Place of Business

SEA-FOOD ENTERPRISES, INC.

FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90047 019 ***150.00



7280 West Palmetto Park RD Suite 106 Boca Raton Fl 33433		7280 WEST PALMETTO PARK RD Suite 106 Boca Raton Fl 33433				DO NOT WRITE IN THIS SPACE				
						 Date Incorporated or Qualified 01/28/1997 				
. Principal P	Place of Business	2a. Mailing Address				4. FEI Number			pplied For	
7		26				65-0731730		N	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 Additional Fee Required		
City & Stat	te	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country 25	Zip 29	70 Cou	ntry		This corporation owes the current Personal Property Tax.		Yes	□No	
	9. Name and Address of Curren	t Registered Agent		L.,		10. Name and Address of New Re	gistered A	gent		
HAL	L, E. ALLAN			81	Name	Barry Ahron				
	0 West Palmetto Park RD Te 106		82	Street	ress (P.O. Box Number is Not Acceptable) L&O W. Palme the for It de Sunt			<u> </u>		
	CA RATON FL 33433			84	City D			85 Zip	Code	
					//	Doca Katum	FL_] 33	Code	
IGNATURE		nt and trie if applicable. (NOTE	: Registered	Agent	signature re	equired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECT	ORS IN 12	
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	HALL, E. ALLEN	1,	1.2 NA	ME	ĺ					
- HEET ADDRESS	7280 W PALMETTO PARK RD,	STF 106			ADDRESS					
	BOCA RATON FL 33433	012 100		TY-ST]					
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	VPD Stein, Kenneth		3.1 III		Į		•	ㅡ ^{a,.go}	٠	
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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 an address, with all other like empowered.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR