| Entity Name: | SHERRI'S | CRAB CAKES | OF SOUT | H FLORIDA, | INC. |
|--------------|----------|------------|---------|------------|------|

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

252 NE 14TH ST DELRAY BEACH, FL 33444

Current Mailing Address:

252 NE 14TH ST DELRAY BEACH, FL 33444

DOCUMENT# P13000094107

FEI Number: 46-4184934

Name and Address of Current Registered Agent:

O'NEIL, ANGELITA 252 NE 14TH ST DELRAY BEACH, FL 33444 US

Date

FILED

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Title | P/D | Title | S |
|-----------------|-----------------------|-----------------|-------------------------------------|
| Name | O'NEIL, ANGELITA | Name | O'NEIL, ANGELITA |
| Address | 252 NE 14TH ST | Address | 252 NE 14TH ST |
| City-State-Zip: | DELRAY BEACH FL 33444 | City-State-Zip: | DELRAY BEACH FL 33444 |
| | | | |
| | | | _ |
| Title | VP/D | Title | т |
| Title Name | VP/D O'NEIL, JOHN | Title Name | T O'NEIL, JOHN |
| | ,_ | | T O'NEIL, JOHN 252 NE 14TH ST |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ANGELITA O'NEIL

PRESIDENT

04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date