

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000003926

Entity Name: SEA FARMS NUTRITION INC.**Current Principal Place of Business:**ATLANTIC HOUSE-OXLEASOW ROAD
EAST MOONS MOAT
REDDITCH WORCESTERSHIRE, B98-ORE**Current Mailing Address:**ATLANTIC HOUSE-OXLEASOW ROAD
EAST MOONS MOAT
REDDITCH WORCESTERSHIRE, B98-ORE GB**FEI Number:** 82-2835516**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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_____
Date**Officer/Director Detail :**

| | |
|-----------------|---|
| Title | TREASURER |
| Name | MATHERS, DAVID |
| Address | ATLANTIC HOUSE-OXLEASOW ROAD EAST MOONS MOAT |
| City-State-Zip: | REDDITCH WORCESTERSHIRE B98-ORE |

| | |
|-----------------|--------------------|
| Title | DIRECTOR |
| Name | PABLO, VINENT R |
| Address | 13321 SW 135TH AVE |
| City-State-Zip: | MIAMI FL 33186 |

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: PABLO VINENT

DIR

04/23/2018

Electronic Signature of Signing Officer/Director Detail_____
Date