

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 14 1997 8:00am
Secretary of State

DOCUMENT # 349866

(4)

1. Corporation Name

PLANTATION FISHERIES INC.

Principal Place of Business

US ONE AND TAVERNIER CREEK
TAVERNIER FL 33070
US

Mailing Address

P.O. BOX 374
TAVERNIER FL 33070-0374
US

3. Date Incorporated or Qualified

07/25/1969

3a. Date of Last Report

04/26/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-1267341

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

JONES MARK
183 BOUGANVILLEA ST
TAVERNIER FL 33070

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

T
NAME JONES, DONALD
STREET ADDRESS 155 IROQUOIS
CITY - ST - ZIP TAVERNIER, FL 00000 ☐ DELETE

S
NAME JONES, PATRICIA
STREET ADDRESS 131 BESSIE RD
CITY - ST - ZIP TAVERNIER, FL 00000 ☒ DELETE

D
NAME JONES, PAUL
STREET ADDRESS 131 BESSIE RD
CITY - ST - ZIP TAVERNIER, FL 00000 ☐ DELETE

P
NAME JONES, MARK
STREET ADDRESS 183 BOUGANVILLEA ST
CITY - ST - ZIP TAVERNIER, FL 00000 ☐ DELETE

V
NAME JONES, CLARK
STREET ADDRESS 191 GARDINIA
CITY - ST - ZIP TAVERNIER, FL 00000 ☐ DELETE

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE T/S
1.2 NAME Jones Donald
1.3 STREET ADDRESS 155 Iroquois
1.4 CITY - ST - ZIP Tavernier FL ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark Jones

4/28/97

Date

305-852-2561

Daytime Phone #

0185202

CR2E034 (9/96)