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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

1999	WE THE	DIVISION OF CO	DRPORATIONS
DOCUMENT # 1. Corporation Name MR. CRABS, INC.	491286		
Principal Place of Business		Mailing Address	<u>,</u>
000 C 110 3140 00		DOO E OCEAN AVE	

FILED May 27, 1999 8:00 am Secretary of State

05-27-1999 90011 008 ***550.00



POMPANO BCH FL 33060 LANTANA FL 33462 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualifed 03/11/1976 4 FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-1656566 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be \Box Added to Fees Trust Fund Contribution 23 28 Country Zip Country This corporation owes the current year Intangible 30 25 29 Personal Property Tax. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent LAVENDER, JOEL P. Street Address (P.O. Box Number is Not Acceptable) 507 SW 11TH COURT FT. LAUDERDALE FL 33316 83 Zip Code 84 City 85 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition 1.1 TITLE TITLE 1.2 NAME CORDERO, WAYNE NAME 3164 NE 31 AVE. 13 STREET ADDRESS STREET ADDRESS LIGHTHOUSE POINT FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 2.1 TITLE ☐ Change TITLE CORDERO, WAYNE 22 NAME NAME 3164 NE 31 AVE. 2.3 STREET ADDRESS STREET ADDRESS LIGHTHOUSE POINT FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE TITLE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

CITY-ST-ZIP 14. 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 problem 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 ap attachment with an address, with all other like empowered.

SIGNATURE: