

# FD3000006065

Florida Department of State  
Division of Corporations  
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Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : M. BURR KEIM COMPANY  
Account Number : I19990000242  
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TALLAHASSEE, FLORIDA

FOREIGN PROFIT QUALIFICATION

M.T. SEAFOOD SALES, INC.

Certificate of Status	1
Certified Copy	0
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DIVISION OF CORPORATIONS

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12-8-03

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. **M.T. SEAFOD SALES, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **NEW JERSEY**

(State or country under the law of which it is incorporated)

3. **22-3730204**

(FEI number, if applicable)

4. **DECEMBER 9, 1999**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **UPON QUALIFICATION**

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. **120 SEVERINO DRIVE, ISLAMORADA, FL 33036**

(Principal office address)

**120 SEVERINO DRIVE, ISLAMORADA, FL 33036**

(Current mailing address)

8. **MANAGEMENT SERVICES**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: **MARTIN TRUEX**

Office Address: **120 SEVERINO DRIVE**

**ISLAMORADA**

(City)

, Florida **33036**

(Zip code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
Signature/Registered Agent

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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**A. DIRECTORS**

Chairman: **MARTIN TRUEX**

Address: **120 SEVERINO DRIVE, ISLAMORADA, FL 33036**

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: **MARTIN TRUEX**

Address: **120 SEVERINO DRIVE, ISLAMORADA, FL 33036**

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: **MARTIN TRUEX**

Address: **120 SEVERINO DRIVE, ISLAMORADA, FL 33036**

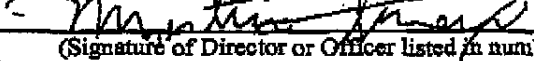
Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL 32302

ATTACHED  
AND  
FILED

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. **MARTIN TRUEX, PRESIDENT**  
(Typed or printed name and capacity of person signing application)

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

M.T. SEAFOOD SALES, INC.  
0100801033

*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on December 9, 1999.*

*As of the date of this certificate, said business  
continues as an active business in the State of New  
Jersey. Annual Reports are outstanding for the  
following year(s):  
2001*

*I further certify that the registered agent and  
registered office are:*

*Martin Truex  
1065 Main Street  
Mayetta, NJ 08092*

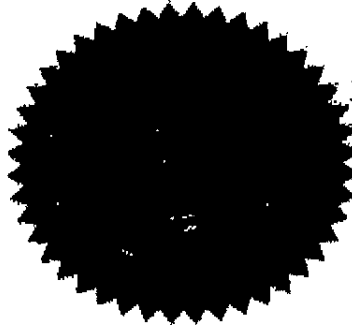
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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

M.T. SEAFOOD SALES, INC.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
5th day of December, 2003

A handwritten signature in black ink, which appears to read "John E. McCormac". The signature is fluid and cursive, written over a horizontal line.

John E McCormac, CPA  
State Treasurer

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