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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 23 1998 8:00am

l '	NUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS		Secretary of State		
DOCUN 1. Corporation	MENT # F8525	7 (6)			
V & M :	SEAFOODS, INC.				
Principal Place	e of Business	Mailing Address		-{	JAK BARAK DINNI NINNI RANAK INNI
1200 MAIN ST. P.O. BOX 2759 FT. MYERS BEACH FL 33832-2759		1200 MAIN ST. P.O. BOX 2759 FT. MYERS BEACH FL 339	802-2759	DO NOT WRITE IN THIS	S SPACE
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3. Date Incorporated or Qualified	
2. Principal P	ace of Business	2a. Mailing Address		06/15/1982 4. FEI Number	Applied For
21		26		59-2198638	Not Applicable
Suite, Apt W. etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	Z ip	Country	B. This corporation owes or has paid the cu	Added to Fees
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registered	i Agent
	SEL, THOMAS F.			<u> </u>	
2121 MCGREGOR BLVD. FT. MYERS FL 33902			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
11.	MILLIO I C GOODE		83		
			84 City	FI	85 Zip Code
11. Pursuant I	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	s, the above-named corp		
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the oblig	⇒ of Florida. Such change was au jations of, Section 607.0505, Flor	uthorized by the corporati rida Statutes.	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE					
12.	Signature, typod or printed name of registered ag OFFICERS AN	pent and tille if applicable (NOTE:	Registered Agent signature require 13.	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE		Change Addition
NAME	VILLERS, JOSEPH A		1.2 NAME		
STREET ADDRESS	538 ESTERO BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	FT MYERS BEACH FL VSD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	VILLERS, ROBERT H,		2.2 NAME		•
STREET ADDRESS	538 ESTERO BLVD.		2.3 STREET ADDRESS	٠. ت	
CITY-ST-ZIP	FT. MYERS BEACH FL	□ DELETE	2.4 CITY-ST-ZIP		T Addition
TITLE NAME		DELETE	3.1 TITLE 3.2 NAME		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		•
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TOTLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	•	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - S1 - ZIP			5.4 CITY-ST-ZIP	<u> </u>	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME CIRITY ADDRESS			6.2 NAME		
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		
14. I hereby c	ertify that the information supplied v	with this filing does not qualify for	r the exemption stated in	Section 119.07(3)(i), Florida Statutes. further of	certify that the information
officer or Block 12	on this annual report or supplement director of the corporation or the rec or Block 13 if changed, or on an atta	al annual report is true and accu eiver or trustee empowered to e achment with an address.	rate and that my signatur xecute this report as requ	Section 119.07(3)(i), Florida Statutes. I further of shall have the same legal effect as if made unired by Chapter 607, Florida Statutes; and that	Inder dath; that I am an I my name appears in

A Walker Goseph a Villers 3-06-98 (941)463-7000 SIGNATURE!