

FILE NOW: FILING FEE AFTER MAY 1ST IS \$500.00

FILED  
Jan 30 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000005949 (0)

1. Corporation Name

OCEAN FRESH SEA FOOD OF MIAMI, INC.

Principal Place of Business

473 EAST WASHINGTON STREET  
NORTH ATTLEBORO MA 02760

Mailing Address

473 EAST WASHINGTON STREET  
NORTH ATTLEBORO MA 02760

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/14/1996

4. FEI Number

04-2574366

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name Robert G. Coutu  
82 Street Address (P.O. Box Number is Not Acceptable)  
16400 Collins Ave.  
83 Unit 1841  
84 City Miami Beach FL 85 Zip Code 33160

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

Robert G. Coutu

1-6-98

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME BROWN, ALAN C  
STREET ADDRESS 473 EAST WASHINGTON STREET  
CITY-ST-ZIP NORTH ATTLEBORO MA

TITLE V ☒ DELETE

NAME ARRUDA, WILLIAM  
STREET ADDRESS 473 EAST WASHINGTON STREET  
CITY-ST-ZIP NORTH ATTLEBORO MA 02760

TITLE V ☐ DELETE

NAME HALL, BRUCE  
STREET ADDRESS 473 EAST WASHINGTON STREET  
CITY-ST-ZIP NORTH ATTLEBORO MA 02760

TITLE TC ☐ DELETE

NAME COUTU, ROBERT G  
STREET ADDRESS 16400 COLLINS AVE., UNIT 1841  
CITY-ST-ZIP MIAMI BCH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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:

Robert G. Coutu

1-6-98

954-316-5070

CR2E034 (10/97)