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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600006263 (5)

EC FISH INC.

Principal Place of Business

Mailing Address

FILED
Jan 16 1998 8:00am
Secretary of State



550 NE 185TH PO BOX 69-4722 **MIAMI FL 33179** MIAMI FL 33269-4722 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 23-2825580 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 26 29 30 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ROSE, STEPHEN T Name 9561 FOUNTAINEBLEAU BLVD., #104 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33172** 83 84 City 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 little if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DPST TITLE DELETE 1.1 TITLE Change Change Addition ROSE, STEPHEN T NAME ROSE, STEPHEN 9561 FOUNTAINEBLEAU BLVD., #104 STREET ADDRESS 1.3 STREET ADDRESS 3005 NE 100 STXT 200 **MIAMI FL 33172** CITY - ST - ZIP MIAMI FL 33190 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZI 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP TITLE DELETE 5.1 TITLE Change Addition NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 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 13 if changed, or on an attactment with an address.

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