2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

20 UN	003 FOR PROF	IT CORPOR	ATION 「(UBR)	FILED Apr 28, 2003 8:00 am Secretary of State	0002999
DOCUMENT # G15968 1. Entity Name A.B. COOK JR. SEAFOOD, INC.				Secretary of State 04-28-2003 91840 014 ***150.00	
1523 HIGHLAN P O BOX 146		Mailing Address 1523 HIGHLAND ST. P O BOX 146 FERNANDINA BCH. FL 320	34		
2. Principal F	Place of Business	3. Mailing Address		F TRAILIN BADE HORR BOTH RAIND BUILD HURL HER BADA DIRN DERH DIDEN REBUT DERH TRAI	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	···· -	CHECK HERE IF MAKING CHANGES	
City & Stat	le	City & State		4. FEI Number Applied For Not Applied For Not Applied For]
Zip	- Country	Zip	Country	5. Certificate of Status Desired	-
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent	┨
			Name		7
COOK, MARJORIE E. 1523 HIGHLAND ST. FERNANDINA BCH. FL 32034			Street Address	s (P.O. Box Number is Not Acceptable)	
FERNAND			City	FL Zip Code	\dashv
	named entity submits this statement flions of registered agent.	for the purpose of changing its r	registered office or regist	ered agent, or both, in the State of Florida. I am familiar with, and accept	1
SIGNATURE .	Signature, typed or printed name of registered ager	n and title if applicable. (NOTE:	Registered Agent signature requi	red when reinstating) DATE	
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND	D DIRECTORS	T 11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	┥
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO ABCOOK, III POB 146	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	(10/
TITLE NAME STREET ADDRESS	PERNANDINA BCH FL 32034 DVS COOK, MARJORIE E 1523 HIGHLAND ST	☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition	CR2E034
CITY-ST-ZIP:-	FERNANDINA BCH FL	الدينينية أيبيد الأصفا	CITY-ST-ZIP	چارچېچېيس د او مانځې <u>اس</u> ا	* *
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CITY-ST-ZIP			CITY-ST-ZIP		4

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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: