FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 28 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1**9**98 DOCUMENT # H07087 (0)**ALHUM SEAFOOD INTERNATIONAL, INC.** Principal Place of Business Mailing Address 1800 NW 96TH AVE. PO BOX 522905 **MIAMI FL 33172 MIAMI FL 33152** DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 06/04/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2424479 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent PEREZ, ALEJANDRO 1800 N.W. 96 AVENUE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33172** В3 84 City 85 Zip Code 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, typod or printed name of registered agent and title if applicable (NOTE Registored Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 THLE Change TITLE PEREZ, ALEJANDRO NAMÉ 1.2 NAME 1800 NW 96TH AVE. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITL€ NAME **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change TITLE 5.1 TITLE 5.2 NAME

6.4 CITY : ST-21P 14. Thereby certify that the information supplied with the tiling 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 of the receiver of the corporation of the receiver of the true that my name appears in Block 12 or Block 13 if changed, or on an attack point with an address. the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

5.3 STREET ADDRESS

5.4 CITY-ST-7IP

61 TITLE

6.2 NAME 6,3 STREET ADDRESS

DELETE

STREET ADDRESS

STREET ADDRESS

CFTY-ST-ZIP

TITLE

NAME

ALEJANDRO PEREZ

03/31/98 (305)597-9027

Change

(10/97)

CR2E034

Addition

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