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

Jan 22 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J17791 (1)JONS C. SEAFOOD, INC. Principal Place of Business Mailing Address 3400 RIVIERA DRIVE 3400 RIVIERA DRIVE P.O. BOX 597 P.O. BOX 597 DO NOT WRITE IN THIS SPACE KEY WEST FL 33041 KEY WEST FL 33041 3. Date Incorporated or Qualified 06/05/1986 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 26 59-2702267 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Ø 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CRUZ, JESUS 3400 RIVIERA DRIVE Street Address (P.O. Box Number is Not Acceptable) KEY WEST FL 33040 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 title if appli (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD DELETE Change Addition 1.3 TITLE TITLE CRUZ, JESUS 1.2 NAME NAME CR2E034 3400 RIVIERA DRIVE STREET ADDRESS 1.3 STREET ADDRESS KEY WEST FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE CRUZ, OMAIDA 2.2 NAME NAME 3400 RIVIERA DRIVE STREET ADDRESS 2.3 STREET ADDRESS KEY WEST FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 1 Addition TITLE 5,1 TITLE Change NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5,4 CITY-ST-ZIP Addition DELETE Change 6.1 TITLE BILE NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 JESUS CRUZ empowered (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 pro-track that my name appears in SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

SIGNATURE

FILED