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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J77707

(4)

HALF-SHELL SEAFOOD, INC.

FILED
Apr 28 1997 8:00am
Secretary of State



Prince al Dis	ace of Business	Mailing Address				-	II DII DADU BARK DIDII I	
2470-52 ROB	BERTS RO.	HALF SHELL SFD. IN	IC.					
MELBOURNE US	FL 32940	P.O. BOX 693 PT. SALERNO FL 349	002.000					÷ ,
us		US	· •··· · • / - · · · · • · · ·			3. Date incorporated or Qualified 06/16/1987	3a. Date of La 06/05/199	
2. Principal	Place of Business	2a. Mailing Address	***************************************			4. FEI Number		Applied For
21	The second secon	26				59-2804401		Not Applicable
22	nt #, etc	Suite, Apt. #, etc.	;.			5. Certificate of Status Desired	1 1 '	5 Additional Required
City & St	ate	City & State				6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to F		
	Country	Zφ		untry		B. This corporation has liability for in	tangible tax und	er s. 199.032,
4	25]	29	30	- 		Florida Statutes 10. Name and Address of New Reg	Yes No	
	9. Name and Address of Curr	ent Registered Agent		81	Name	10. Name and Address of New Neg	istered Agent	
	AMPBELL, ROGER							
	189 SE DIXIE HIGHWAY DRT SALERNO FL 33492		B2 Street Ac		Street Addre	ss (P.O. Box Number is Not Acceptabl	e)	
P	ON SALENNO FL 33482			83				
				84	City	11-17- <u> </u>	85	Zip Code
				للل			PL:	·
SIGNATURI	F Supration Typed or professionner of registured a			red Age	int signature require	oration submits this statement for the pun's board of directors. I hereby accept dwhen reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	
12.	OF ICERS A	DELETE		TITLE		ADDITIONS/CHANGES TO OFFICE	Char	
NAME	CAMPBELL, ROGER	Land Determ	•	NAME			(0/m	igo 🗀 Adonoi
arrici. Street address	A 4TA PA DADEDTA DO				ADDRESS			
COTY - ST - ZIP	MELBOURNE FL			CITY-S				
THUE		DELETE			·			
NAM:				TATES.	,		Char	ige Addition
STPEET ACCORES	l .			NAME	1		Char	ige Addition
	8		2.21	NAME	ADDRESS		Char	ige Addition
	s		2.21 23.5 2.4	NAME				
Ody-ST ZIP	s] DELETE	221 233 2.4 E 3.11	name Street City-S Title			☐ Char	
COY-ST ZIP TOLE NAME			22) 233 2.4 E 3.11	NAME STREET CITY-S TITLE NAME	ST-ZIP			
OUY-ST ZIP TOLE NAME STREET ADORES			22) 233 2.4 E 3.11 3.21 333	NAME STREET CITY-S TITLE NAME STREET	ADDRESS			
OUT-ST ZIP TULE NAME STREET ADDRES OUTY-ST-ZP		DELETE	221 233 2.4 E 3.11 3.21 3.35 3.4	NAME STREET CITY-S TITLE NAME STREET CITY-S	ADDRESS		Char	oge
COLY-ST_ZIP TOLE NAME STREET ADDRES GOY-ST-ZP THUE			221 233 2.4 E 3.11 3.21 3.33 3.4 E 4.11	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRESS			oge
COLY-ST_ZIP TOLE NAME STREEL ADORES CVEY-ST-ZP THUE NAME	s	DELETE	221 233 2.4 E 3.11 3.21 3.33 3.4 E 4.11	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME	ADDRESS		Char	oge
COLY-ST_ZIP TOLE NAME STREEL ADDRES GOLY-ST-72 TOLE NAME STREEL ADDRES STREEL ADDRES	s	DELETE	221 235 24 E 311 321 395 34 E 411 4.2	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS ST-ZIP ADDRESS		Char	oge
CHY-ST_ZIP THE NAME STREEL ADDRES OFY-ST-ZP THUE NAME STREEL ADDRES CHY-ST-ZIP	s	DELETE	221 235 2.4 E 311 3.21 335 34. E 411 4.2 4.35	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME	ADDRESS ST-ZIP ADDRESS		Char	nge ∐ Addition
COY-ST ZIP THE NAME STREEL ADDRES GOY-ST-7P THE NAME STREEL ADDRES COY-ST-7P THE THE THE THE THE THE THE THE	s	DELETE	221 235 24 E 311 321 335 34 E 411 4.2 4.35 4.44 E 5.11	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S CITY-S	ADDRESS ST-ZIP ADDRESS		Char	nge ∐ Addition
COLY-ST ZIP TYPE NAME STREEL ADORES COLY-ST-72 THUE NAME STREEL ADDRES CHY-ST-ZIP THUE NAME	s s	DELETE	221 235 24 E 3.11 3.21 3.35 3.4 E 4.11 4.2 4.35 4.41 E 5.11	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRESS ST-ZIP ADDRESS		Char	nge ∐ Addition
COLY-ST ZIP TOLE NAME STREEL ADORES GOLY-ST-7P THUE NAME STREEL ADORES COLY-ST-ZIP THUE THEE NAME STREEL ADORES STREET ADORES	s s	DELETE	221 235 24 E 311 321 335 34 E 411 4.2 4.35 4.41 5.11 5.21 5.36	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Char	nge Addition
COY-ST-ZIP THUE NAME STREEL ADORES COY-ST-ZIP THUE NAME STREEL ADORES COTY-ST-ZIP TRUE NAME STREEL ADORES COTY-ST-ZIP COTY-ST-ZIP	s s	DELETE	221 235 24 E 311 321 335 34 E 411 4.2 4.35 4.41 5.11 5.21 5.36	NAME STREET CITY-S TITLE NAME STREET CITY-S NAME STREET CITY-S TITLE NAME STREET NAME STREET	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Char	nge Addition
COTY ST ZIP TOLE NAME STREET ADORES CAY SE ZIP THUE NAME STREET ADORES COTY SE ZIP THUE NAME STREET ACORES COTY SE ZIP THUE NAME	s s	DELETE	E 411 524 534 E 5.11 624 E 6.11	NAME STREET CITY-S VITLE NAME NAME NAME NAME NAME NAME NAME NAM	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Char	nge Addition
COY-ST-ZIP TOLE NAME SEBELLADORES COY-SE-ZIP THUE NAME SEBELLADORES COLY-SE-ZIP THUE NAME SEBELLADORES COLY-SE-ZIP THUE THUE THUE THUE THUE THUE	5	DELETE	E 311 4.2 4.3 E 411 4.2 4.3 4.4 E 5.11 5.21 5.33 5.46 E 6.11 6.21	NAME STREET CITY-S VITLE NAME NAME NAME NAME NAME NAME NAME NAM	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP		Char	nge Addition

Lido 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 in high and that my name with an address.

SIGNATURE

·----

407-254-24

e Phone 1