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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J86002 (9)

1. Corporation Name

ROLLO'S SEAFOOD, INC.

Principal Place of Business	Mailing Address
COVAS,LAWRENCE M. 313 CAROLINE ST. MILTON FL 32570 US	COVAS,LAWRENCE M. 313 CAROLINE ST MILTON FL 32570 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
08/04/1987	05/26/1994

2. Principal Place of Business	2a. Mailing Address
21 6571 CAROLINE ST.	26 6571 CAROLINE ST.
Suite, Apt. #, etc. 22 —	Suite, Apt. #, etc. 27 —
City & State 23 MILTON, FL.	City & State 28 MILTON, FL.
Zip 24 32570 Country 25 USA	Zip 29 32570 Country 30 USA

4. FEI Number: 59-2842278 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
COVAS, LAWRENCE M. 331 CAROLINE ST SW SUITE 600 MILTON FL 32570	81 Name: COVAS, LAWRENCE M. 82 Street Address (P.O. Box Number is Not Acceptable): 6571 CAROLINE ST. (TO BE CHANGED FOR EMERGENCY MGMNT PURPOSES) 83 — 84 City: MILTON FL 85 Zip Code: 32570

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: L. M. Covas — LAWRENCE M. COVAS — 4/10/95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE	SAME	☒ Change ☐ Addition
NAME	COVAS, LAWRENCE M.	12 NAME	SAME	
STREET ADDRESS	313 CAROLINE ST.	13 STREET ADDRESS	6571 CAROLINE ST.	
CITY-ST-ZIP	MILTON FL	14 CITY-ST-ZIP	MILTON, FL. 32570	
TITLE	STD	21 TITLE	SAME	☒ Change ☐ Addition
NAME	COVAS, DONNA M.	22 NAME	SAME	
STREET ADDRESS	313 CAROLINE ST.	23 STREET ADDRESS	6571 CAROLINE ST.	
CITY-ST-ZIP	MILTON FL	24 CITY-ST-ZIP	MILTON, FL. 32570	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 if changed, or on an attachment with an address.

SIGNATURE: L. M. Covas — LAWRENCE M. COVAS — 4/10/95 — (904) 623-1978
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)

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