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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J86002

(9)

ROLLO'S SEAFOOD, INC.

FILED

May 26 1998 8:00am

Secretary of State

Principal Place of Business	Mailing Address				
6571 CAROLINA ST. MILTON FL 32570 US	6571 CAROLINE ST. MILTON FL 32570 US				

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6571 CAROLINA \$T. MILTON FL 32570 US		Ņ	6571 CAROLINE ST. MILTON FL 32570 US			DO NOT WRITE IN THIS SPACE						
							3.	Date Incorporated or Qualified 08/04/1987				
2. Principal Place of Business 21			2a. Mailing Address 26			4.	4. FEI Number Ap 59-2842278 No					
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			5.	Certificate of Status Desired		.75 Additional ee Required			
City & State			28	City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
24	Zip	Country 25	29		Country 30			This corporation owes or has paid the c Personal Property Tax due June 30.	Yes Yes	No No		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
COVAS, LAWRENCE M. 6571 CAROLINE ST.				81								
MILTON FL 32750			82	Street Addre	ddress (P.O. Box Number is Not Acceptable)							
					83							
					84	,		F		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 proted name of registered agent and tire if applicable (NOTE Registered Agent signature required when reinstating) DATE												
40	· ·	MA 2G FOLEO	CHERT	TODE	12			ADDITIONS/CHANGES TO DEFICEDS AN	UD DIDE	CTODE INLES		

DELETE 1.1 TITLE Change TITLE COVAS, LAWRENCE M. NAME 1.2 NAME 6571 CAROLINE ST. STREET ADDRESS 1.3 STREET ADDRESS **MILTON FL** CITY-ST-ZIP 14 CITY-ST-ZIP ☐ DELETE Change Addition 2.1 TITLE COVAS, DONNA M. NAME 2.2 NAME 6571 CAROLINE ST. STREET ADDRESS 23 STREET ADDRESS MILTON FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 600002537656 TITLE 6.1 TITLE NAME -05/27/98--01107--001 STREET ADDRESS 6.3 STREET ADDRESS ***558.75

CITY-ST-ZIP 14. Thereby 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 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP