## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

J96337 DOCUMENT # 1. Corporation Name

(7)

INLAND SEA FARMS, INC.

Frincipal Place of Business Mailing Address  % CHARLES R. SMITH  340 FAIRWEATHER LN  FT. MYERS BEACH FL 33931  FT. MYERS BEACH FL 33931  FT. MYERS BEACH FL 33931							
						3. Date Incorporated or Qualified 3a. Date of Last Report 06/16/1995	
1 F:		Fren T	2a. Mailing Address			4. FE! Number Applied Fo.	
1] Suite Apt.	# e*c	Suite, Apt.	t etc			1 Not Applica	
2	v, e.c.	27	٦ '			5. Certificate of Status Desired \$8.75 Additional Fee Required	d
Gity & State	е	Crty & State			, , , , , , , , , , , , , , , , , , , ,	6. Election Campaign Financing \$5.00 May Be	
<b>3</b> ] - Ζιρ	Country	[ <b>28</b> ]		ountry		Added to Fees	
4] ***	25]	29	30	ountry	•	This corporation has liability for intangible tax under s 199.032,     Florida Statutes	
	9. Name and Address of Curr			Т		10. Name and Address of New Registered Agent	
				81	Name		
	CHARLES R.			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
	rweather in Ers beach fl 33931			83			
	INO DENOTITE GOSOT			03	1		
				84	City	FL 85 Zip Code	
SIGNATURE	DPS	Fold and to to displaceable.  ND DIRECTORS	1:		nt signature requir	riod when reinstating: DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Additional Additional Change Additi	ion
NAME STREET ACCRESS CITY - ST- ZIF	SMITH, CHARLES R. 340 FAIRWEATHER LN FT. MYERS BCH. FL		1.3		T AFIDRESS		
litet	DVT	DE		4 CITY-: 1 TITLE	51-21	☐ Change ☐ Additi	on
#M:	SMITH, MARILYN N.		2:	NAME			
	340 FAIRWEATHER LN FT. MYERS BCH. FL		2:	BIRTE 8	r address		
. IV 51 ZP	FI. MIENO DON. FL	FT NE		4 CHTY-	ST-ZIP		
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STREET ADDRESS					T ADDRESS		
0i'Y S1-ZiP <b>14.</b> I do hereb	I security that the information supplies	d with this filma is volue		t CHY-! id_doc		for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	
certify that path; that	t the information indicated on this an	inual report or supplemi poration or the receiver	ental annual repo or trustee empov	rt is to	ue and accur	rate and that my signature shall have the same legal effect as if made unce this report as required by Chapter 607, Florida Statutes; and that my name	ler.

SIGNATURE: Charles

OR DIRECTION 1/2+/96 941-765-5133

CR2E034 (12/95)