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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

J98679

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DOCUMENT #

JDP SEAFOODS, INC.

Principal Place of Business Maling Address							din in ti didik di	alı atalı alalı ditil bibli il
102401 OVERSEAS HWY KEY LARGO FL 33037 US			P.O. BOX 3050 KEY LARGO FL 33037 US		3. Date incorporated or Qualified	9e Doto	of Last Report	
						10/23/1987		05/01/1995
1	t, Principal Place of Business		Mailing Address			4. FE! Number		Applied For
	· · · · · · · · · · · · · · · · · · ·	26				65-0012967		Not Applicable
Suite, Apt. #, etc. City & State 3		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
		28	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zφ	Country		Zip	Country		8. This corporation has liability for in	ntangible tax	unders 199.032,
	25	29		30		Florida Statutes Yes		·
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
				84	City			85 Zip Code
or registered familiar with siGNATURE: _(d agent, or both, in the State of Fic , and accept the obligations of, Sc 	orida. Such oction 607.0 $Q, abla_0$	change was authorize 0505, Florida Statutes.	od by the corp ・ムレ	oration's board	ation submits this statement for the purp d of directors. I hereby accept the appo	PL pose of char sintment as r	egistered agent. I am
or registered familiar with siGNATURE:(si	d agent, or both, in the State of Flo , and accept the obligations of, Se Law DEMICK grutue, byed or printed name of registered age	orida, Such oction 607.0 Ont and title if a	change was authorize 0505, Florida Statutes. EAN BERW (NOT	CK E: Registered Ager	oration's board	d of directors. I hereby accept the apportunity of the directors of the di	pose of char pintment as r DATE	egistered agent. I am 4 - 96
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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)(k), 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.

3 4 CITY-ST-ZIP

4.3 STREET ADDRESS

5 3 STREET ADDRESS

6 3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 C/TY - ST - Z/P

4 1 TITLE

4 2 NAME

5 1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

CITY - ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST-ZIP

City-St-ZiP

10016

NAME

THEF

NAME

TITLE

NAME

C. Stean BENDICK C. JEAN BERWICK SEC/TREAS. 2-14.96 305.451.4665

Change

Change

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Addition

Addition

Addition