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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K17237 1. Corporation Name

OCEAN GOURMET PRODUCTS, INC.

												1
Principal Place of Business Mailing Address								, , , , , , , , , , , , , , , , , , , ,				
1961 NW 22 STREET 1951 NW 22 STREET					_							
FT LAUDERDAL	E FL 33311	LAUDERDALE FL 33311				DO NOT WRITE IN THIS SPACE						
								3. Date Incorporated or Qualife	t			
								03/08/1988				
2. Principal P	lace of Busines		2a.	2a. Mailing Address				4. FEI Number			Applied For	
21			26	26				65-0934141			Not Applicab	le
Suite, Apt.	#, etc.	<u></u> -	27	Suite, Apt. #, etc.				5. Certifcate of Status Desired			5 Additional Required	
City & State	e			City & State				6. Election Campaign Financing		\$5.0	0 May Be	7
23			28					Trust Fund Contribution		Adde	d to Fees	
Zip Country				Zip Country				8. This corporation owes the current year Intangible				
24	25		29		30			Personal Property Tax.	Desistered	Yes	XNo	\dashv
Name and Address of Current Registered Agent							Name	10. Name and Address of New	Registered	Agent		ᅱ
WII	SHIH TZA					81	Name					_
1951 NW 22 ST				82			Street Add	dress (P.O. Box Number is Not Accep	table)			
FT LAUDERDALE FL 33311						83						\dashv
												_
						84	City		FL	85 Z	ip Code	- (
office or r	egistered ager im familiar with	it, or both, in the , and accept the	State of Florid obligations of,	a. Such change was Section 607.0505, Fl	authorize orida Sta	ed by atutes	the corpora	rporation submits this statement for the tion's board of directors. I hereby acc	apt the appor	changing ntment as	its registered registered	•
	Signature, typed or	printed name of regist					t signature requi	red when reinstating)	DATE AA	D DIDEC	TORO IN 12	-
12.	BO	OFFICE	RS AND DIRE	CTORS DELETE	13			ADDITIONS/CHANGES TO O	FFICERS AN	Chang		_
TITLE	PD	T74				TITLE					,	
NAME	WU, SHIH					NAME	. +0000000					}
STREET ADDRESS	1951 NW 2 FT LAUDER						ADDRESS					
CITY-ST-ZIP	VD VD	TUALE FL		☐ DELETE		CITY-5	I-ZIP			Chang	ge 🔲 Addit	tion
TITLE NAME	BUCHER, 3	IOHN C			- 1	NAME					_	
STREET ADDRESS	AGEA ARAL C						ADDRESS					
city-st-zip FT LAUDERDALE FL							T-ZIP ~					[
TITLE	STD			☐ DELETE		TITLE		,	-,-	Chang	ge 🔲 Addii	tion
NAME	WU, TSAI I	HUI HSU			3.2	NAME						
STREET ADDRESS 1951 NW 22 STREET				3.3 ST			ADDRESS					
CITY-ST-ZIP	FT. LAUDE	rale fl			3.4.	CITY-S	T-ZIP					_
TITLE				☐ DELETE	4.1	TITLE				Chang	ge 🗌 Addi	tion
NAME	}				4. 2	NAME						Į
STREET ADDRESS					4.3	STREET	ADDRESS					
CITY-ST-ZIP				□ SELETT		CITY-S	T-ZIP ·	·		Chang	ge 🔲 Addi	tion
TITLE	ĺ			☐ DELETE		TITLE				· Clauf	ac l'Twoon	(4VII
NAME					- 1	NAME etdee	LADDDESS					
STREET ADDRESS				•			T ADDRESS					
CITY-ST-ZIP				[] SELETE		CITY-S	1-ZP			Chang	ge ∏ Addi	tion
TITLE				☐ DELETE		NAME				□ cuani	an □ van	4011
NAME	1						T ADDDESS					-
STREET ADDRESS	1				6.3	SIKEE.	ADDRESS					- 1

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZiP

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90093 005 ***150.00

(954)484-7500