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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K29784

(1)

UNIVERSAL FRESH SEAFOOD, INC.

Lam an officer or director of the corporation or the appears in Block 12 or Block 13 if changed, or of

SIGNATURE:

FILED Jan 30 1997 8:00am Secretary of State

Principal Plac % CARLOS R. 3290 N.W. SO MIAM FL 3314	OLIVER UTH RIVER DR	3290 N.W. SOUTH RI	Mailing Address * CARLOS R. OLIVER 3290 N.W. SOUTH RIVER DR MIAMI FL 33142-6950					
					3. Date incorporated or Qualif 07/28/1988 4. FEI Number		Date of Last Re /01/1996	eport
	Place of Business	2a. Mailing Address	2a. Mailing Address				Ap	pplied For
21		26			65-0062089			ot Applicable
Suite, Apt.	#, etc	<u> </u>	Suite. Apt. #, etc.			X	\$8.75 A	
City & Stat	· · · · · · · · · · · · · · · · · · ·	City & State	City & State		Ph			
23	.c		Only & Glade		6. Election Campaign Financir Trust Fund Contribution	,g \square	\$5.00 Added t	
Zip Country			Zip Country			for intensible		
24 25		29	30		8. This corporation has flability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Cur		1901		10. Name and Address of New			
OLI	VER, CARLOS R.		8	1 Name				
	21 S.W. 18TH ST		8:	Ctroot Add	ress (P.O. Box Number is Not Acce	ntable)		
	MI FL 33175		18	Sileer Add	ITESS (F.O. BOX NUMBER IS NOT ACCE	rprable)		
			8:	3		***************************************		
}				4 60				Code
			8-	4 City		Fl	85 Zip (Code
office or i agent. La SIGNATURE	registered agent, or both, in the Starm familiar with, and accept the ob-	· · · · · · · · · · · · · · · · · · ·			tion's board of directors. I hereby a	ccept the ap	pointment as	registered
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO C	FFICERS AN	ID DIRECTOR	3S IN 12
THILE	PD	DELET	1.1 TITLE				Change	Addition
NAME	OLIVER, CARLOS R		1.2 NAME	<u> </u>		,		
STREET ADDRESS	14221 SW 18 ST		1.3 STREI	ET ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY-	-ST-ZIP		`		
TITLE	PD	☐ DELETE 2					☐ Change	Addition
NAME	OLIVER, CARLOS R.		2.2 NAME					
STREET ADDRESS	14221 SW 18TH ST.		2.3 STRE	ET ADDRESS				
CITY - ST - ZIP	MIAMI FL		2 4 CITY	-ST-ZIP			···	
TITLE	TD CARLOS B	☐ DELETI		į.		eria eria	Change	Addition
NAME	OLIVER, CARLOS R.		3.2 NAME	l l				
STREET AODRESS	14221 SW 18 ST.		3.3 STRE	et address				-
CITY-ST-ZIP	MIAMI FL	T peret	3 4. CITY			······	T 7 05	13395-6
TITLE		L_] DELET	•				L Change	☐ Addition
NAME			4. 2 NAM					1
STREET ADDRESS				et address				
CITY-ST-ZIP			4.4 CITY	····			☐ Change	Addition
TIFLE		וון טוננו					LL Change	LL Addition
NAME			5.2 NAMI	i				
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		T percy	5.4 CITY				[Ch	Autoria
TITLE		☐ DELET	•				Change	Addition
NAME			6.2 NAM	}				ļ
STREET ADDRESS			6.3 STRE	ET ADDRESS				

6.4 CITY-ST-ZIP 14. Loo hereby certify that the information supplied with this filling 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 ecoiver 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 go any array ment with an address.