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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION OF C	ORPORATIONS			
DOCUI	MENT # K8653	2 (4)				
PASS-A	A-GRILLE DEEP SEA FISHI	1				
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Principal Place	of Business	Mailing Address				
,						
180 N TESSIER DR ST PETERSBURG BCH FL 33706 ST PETERSBURG BCH FL 33706 ST PETERSBURG BCH FL 33706			33706			
US US				3. Date Incorporated or Qualified		
					3a. Date of Last Report 05/01/1995	
<u> </u>	ace of Business	2a. Mailing Address		05/09/1989 4. FEI Number	Applied For	
21		26		59-2949544	Not Applicable	
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State	3	City & State			Fee Required	
23	•	28		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Ζιρ	Country:	Zıp	Country	This corporation has liability for		
24	25		30		□ No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	legistered Agent	
B. (1777 - 1			81 Name			
PATTERSON, CRAIG L 180 N TESSIER DR ST PETERSBURG FL 33706			82 Street A	82 Street Address (P.O. Box Number is Not Acceptable) 83		
			92			
31 FEIE	nobund FL 33/00		63			
			84 City		FL 85 Zip Code	
			the above named co by the corporation's l	rporation submits this statement for the pur board of directors. Thereby accept the appi	· · · · · · · · · · · · · · · · · · ·	
SIGNATURE _	h, and accept the obligations of. Seci	non 607.0505, Florida Statutes.				
SIGNATURE	Signature, typod or printed manic of registered age.	Constituting plans (Not) (s	Registered Agent signature re	മുണ്ടേറ് ഡീ ക്ക ക്രേടിഷ്സ്സ്	DATE	
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFF		
TITLE NAME	DP Patterson, Cheryl A	☐ DELETE	1 1 TITLE		Change 🔲 Add tion	
STREET ADDRESS	3062 E VINA DEL MAR BLVD		1.2 NAME	180 N. Tessier Di	·	
CITY-ST-ZIP	ST PETERSBURG FL		1.3 STREET ADDRESS	180 N, Teaster Di		
TITLE	S	☐ DFLETE	2 1 TITLE		Change Addition	
NAME	PATTERSON, CRAIG L	<u></u>	2.2 NAME	_ ^	, -	
STREET ADDRESS	3062 E VINA DEL MAR BLVD		23 STREET ADDRESS	180 N. Tessier Dr	1	
CITY - ST - ZIP	ST PETERSBURG FL		2.4.01TY-\$1-ZIP			
TITLE		☐ DELETE	3 1 TIFLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CHTY-ST-ZIP		Prince	3.4 CiTY+ST-ZIP			
TITLE		☐ DECETE	4 1 TITLE		Change Addition	
NAME STREET ADDRESS			4.2 NAME			
CITY-ST-ZIP			4 3 STREET ADDRESS		ļ	
TITLE		DELETE	4 4 C-TY - ST - Z P 5 1 T-1LE		Chagas El Addition	
NAME			5.2 NAME		Change Addition	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 City -ST -ZIP			
TITLE		☐ DELETE	6 1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	partification in the second		6.4 CITY - ST - ZIP			
red nereby	r certify that the information supplied the information indicated on this appli	with this filing is voluntarily furnished	ed and does not quali	fy for the exemption stated in Section 119.0	07(3)(k), Florida Statutes. I further	

ceruly 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 inchanged, or on an attachment with an address SIGNATURE: SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #