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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L00982

(3)

Mailing Address

AMERICA'S FAVORITE SEAFOOD, INC.

FILED
Mar 27 1997 8:00am
Secretary of State

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200 S ATLANTIC AVE 16313 N. DALE MABRY HWY. DAYTONA BCH FL 32118 SUITE 100 US TAMPA FL 33618-1326									
						<ol> <li>Date Incorporated or Qualified 07/06/1989</li> </ol>		te of Last fi 4/1996	leport
2. Pencipal Pla	ape of Bosinees	2a. Mailing Address				4. FEI Number			oplied For
21		26				59-2967544			ot Applicable
Suite Apt. # 22	F €ti:	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & State 23		City & State				<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>			May Be to Fees
Ζψι <b>24</b>	Country <b>25</b>	Z(p)	Gou	ntry		8. This corporation has liability for in Florida Statutes	ntangible Yes	tax under s No	: 199.032,
<u>::::</u> 1	9. Name and Address of Cui		4			10. Name and Address of New Reg	stered /	gent	
HOD	GES, GEOFFREY TODD			81	Name				
501 E KENNEDY BLVD., SUITE 1400 TAMPA FL FL 33602			82	Street Address (P.O. Box Number is Not Acceptable)					
(17m)	A I L I L GOODE			83					
				84	City		FL	<b>85</b> Zip	Code
11. Pursuant l	a the provisions of Sections 607.	0502 and 607.1508, Florida Statu	ites, the al	ll bove	e-named corp	poration submits this statement for the p	uroose of	changing i	ts registered
office or re	a stancil agent, or both, in the S	tate of Florida. Such change was oligations of, Section 607.0505, F	authorize	d by	the corpora	ition's board of directors. I hereby accep	the app	ointment as	registered
SIGNATURE									
	Signature type I or per to 1 name of regidens			d Age	nt signature requ	ilred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE COC AND	DIBECTO	DC IN 12
12.	PD	AND DIRECTORS  DELETE	13. 1111	TI F	<del></del> [ · · ·	ADDITIONS/CHAINGES TO OFFIC	ENS AND	Change	Addition
NAM	HATTAWAY, WILLIAM		12 N						
SHIELL ADDREST	16313 D DALE MABRY STE	100	1.3 \$	TREET	ADDRESS				
OHY 51 70°	TAMPA FL		1.4 0	ITY - S	T-ZIP				
THILF	SDT	DELETE	211	TLE				☐ Change	Addition
NAM	ROEHL, FRANK C. III		2 2 N	AME					
STREET ADDRESS.	16313 N. DALE MABRY HW	fY .	2.3 S	IREE1	ADDRESS				
CON SEZIE	TAMPA FL	DIDITI			ST-ZIP		<del></del>	Change	Addition
1111	VP	[] DELETE	3.1 To					La Change	
NW:	NELSON, WARREN R. 16313 N. DALE MABRY HW	/V #100	32 N		ADDRESS				
STREET ADDRESS   CHES - ZIP	TAMPA FL	rij <del>y tou</del>			SI-ZiP				
1946 - 721 1946	11 mm ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	DELETE	4.1 T	•••••				Change	Addition
NAMI			4.21	NAME					
STREET ALE MEDS			4.3 S	TREET	ADDRESS				
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Till E		DELETE	5.1 T	ILE				Change	Addition
NAME			52N						
STREET AT ORESS			1		ADDRESS				
CHY-ST Zer		FT WP. W.		•	ST-ZIP			Change	Addition
1 111		[ ] DETELE	617					C Change	□1 MORRIOR
HAME			62 N						
STALL EXTROPERS:					I ADDRESS				
(317-51 Zet <b>14</b> Leto bored	acted to that the information sur	soled with this filma does not our	6.4 0 alify for the	ary-: exe	ST-ZIP emption state	ed in Section 119.07(3)(i), Florida Statute	s. I furthe	r certify tha	it the

The instance of the companion subject with this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that farm an officer or director of the corporation of 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 any attachment with an address.

SIGNATURE:

3-11-97 813 961-0944 Date Dayline Phone #