

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000098574**

1. Entity Name  
**CARIBBEAN MARICULTURE, LLC**



Principal Place of Business  
**8200 113TH STREET  
SUITE 103  
SEMINOLE, FL 33772 US**

Mailing Address  
**8200 113TH STREET  
SUITE 103  
SEMINOLE, FL 33772 US**

**DO NOT WRITE IN THIS SPACE**



04042008No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
**83-0438644**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BARTHOLMEY, SCOTT  
8200 113TH STREET  
SUITE 103  
SEMINOLE, FL 33772**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GAGNON, JEAN 8200 113TH ST SUITE 103 SEMINOLE, FL 33772
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BARSA ENTERPRISES, LLC. 8200 113TH STREET NORTH SUITE 103 SEMINOLE, FL 33772
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U00000916959  
05/13/08-80022-006 138.75

**DO NOT WRITE  
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*Scott Bartholmey*  
**MANAGING MEMBER**

**AS BARSA ENTERPRISES LLC**

*4/20/08*

Date

Daytime Phone # \_\_\_\_\_