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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

VINA [n Name DEL MAR FISHERIES, INC.							
Principal Place	e of Business	Mailing Address						
Principal Place of Business %THERESA I. HADLETT 362 HERMOSITA DRIVE ST. PETERSBURG BEACH FL 33706		%THERESA I. HADLETT 362 HERMOSITA DRIVE ST. PETERSBURG BEACH FL 33706		O Data language				
					 Date Incorporated or Qualifie 02/21/1990 		e of Last F 4/19/19 :	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26		59-2994523			Not Applicable	
Suite, Apt.	#₁ etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
City & State	e	City & State			Election Campaign Financing			Required
23		26			Trust Fund Contribution	' 🗆		O May Be
Z ip	Country	Zip	Cour	ntry	8. This corporation has liability (for intangible to		
24	9. Name and Address of Curre	29	30			Yes No		
	9, Haille and Address of Curre	int nagistereo Agent		81 Name	10. Name and Address of Nev	w Registered	Agent	
HADLET	T, THERESA I.							
362 HERMOSITA DRIVE ST. PETERSBURG BEACH FL 33706			ľ	82 Street Ad	idress (P.O. Box Number is Not Accep	itable)		
			Ī	83				
			L				85 Zi	p Code
			l:	84 F City				p code
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Stati	utes the show	84 City re-named corp	oration submits this statement for the	FL purpose of cha	.	registered office
familiar wi	th, and accept the obligations of, Sec	ction 607.0505, Florida Statuti	utes, the aboverized by the coes.	re-named corporporation's bo	oration submits this statement for the pard of directors. I hereby accept the a	purpose of chappointment as	.	registered office I agent. I am
familiar wi	th, and accept the obligations of, Sec Signature, typed or printed name of registered ager	ction 607.0505, Florida Statuti	utes, the aboverized by the coes.	re-named corporporation's bo	and of directors, I hereby accept the a	purpose of chappointment as	anging its registered	l agent. I am
familiar wi	Signature, typed or printed name of registered ager OFFICERS AN	nt and title if applicable (utes, the aboving the colors. NOTE: Registered /	re-named corporporation's bo	pard of directors. I hereby accept the a	purpose of chappointment as DATE DEFICERS AND	anging its registered	l agent. I am
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Harlan Hadlett / 4/26/96 813-360-3223