

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90448 048 ***150.00

DOCUMENT # L99175

1. Entity Name

SEA GOURMET CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1118 NE 14th Avenue

Suite, Apt. #, etc.

3. Mailing Address

4817 NE 23rd Avenue

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Fort Lauderdale, FL

City & State

Fort Lauderdale, FL

4. FEI Number

65-0213703

Applied For

Not Applicable

Zip

33304

Country

USA

Zip

33308

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Randy E. Elton

Street Address (P.O. Box Number is Not Acceptable)

1118 NE 14th Avenue

City

Fort Lauderdale,

FL

Zip Code

33304

**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.

SIGNATURE

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

Randy E. Elton

(NOTE: Registered Agent signature required when reinstating)

April 29, 2002

DATE

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.**
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PTD

Randy E. Elton

1118 NE 14th Avenue

Fort Lauderdale, FL 33304

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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TITLE

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STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Randy E. Elton

April 29, 2002

Date

Daytime Phone #

CR2E034B (12/01)