

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M04304

1. Entity Name

KALAMAR SEAFOOD INC.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90072 003 ***158.75

Principal Place of Business

2315 W. 77TH ST.
HIALEAH FL 33016

Mailing Address

2315 W. 77TH ST.
HIALEAH FL 33016

2. Principal Place of Business

2490 W 78 ST

3. Mailing Address

2490 W 78 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HIALEAH, FL

City & State

HIALEAH, FL

Zip

33016

Country

Zip

33016

Country

4. FEI Number

59-2437398

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARCUS, PAUL R.
9200 S DADELAND BLVD #520
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 P ☐ Delete
NAME VAZQUEZ, ROBERTO
STREET ADDRESS 9250 SW 70 ST.
CITY-ST-ZIP MIAMI FL

TITLE V ☒ Delete
NAME VAZQUEZ, ESTRELLA
STREET ADDRESS 5210 SW 130 AVE
CITY-ST-ZIP DAVIE FL

TITLE S ☐ Delete
NAME VAZQUEZ, BARBARA E.
STREET ADDRESS 5210 SW 130 AVENUE
CITY-ST-ZIP DAVIE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S/T ☐ Change ☒ Addition
NAME VAZQUEZ, ROBERTO
STREET ADDRESS 5210 S.W. 130 AVE
CITY-ST-ZIP FT. LAUDERDALE, FL 33330

TITLE V ☒ Change ☐ Addition
NAME VAZQUEZ, BARBARA E.
STREET ADDRESS 5210 S.W. 130 AVE
CITY-ST-ZIP FT. LAUDERDALE, FL 33330

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Barbara Vazquez Barbara Vazquez 4/17/01 305 822-5586

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)