2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 24, 2008 8:00 am Secretary of State

DOCUMENT # M19696 1. Entity Name OMAR SEAFOOD, CORP.					03-	-24-2008 9	90047 00	08 ***15	0.00	
Principal Place of Business 2111 NW 10 AVE. MIAMI, FL 33127		Mailing Address 4545 N.W. 7TH STREET 12 MIAMI, FL 33126 US			A INTERNATION FOR THE COMP	E CIIFE (CIIE BII) I	EIBII EIBII BIEI	II BEBII BEBIL TIBI	(TE) (1 (88)	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02272008 C	ng-P	CR2E03	34 (12/06)		
City & State		City & State			4. FEI Number 59-2576432			_ 	plied For t Applicable	
Zip	Country	Zip	Country		5. Certificate of Statu	s Desired		\$8.75 Add Fee Required		
	6. Name and Address of Current	Registered Agent			7. Name and Addres	s of New Reg	jistered Aç	jent		
VILLAR, OMAR 3322 SW 175TH AVE MIRAMAR, FL 33029				Name Street Address (P.O. Box Number is Not Acceptable)						
2	<i>4</i>		City				FL	Zip Code	,	
8. The above the obligati	named entity submits this statement for ions of registered agent.	or the purpose of changing its re	egistered office or regis	stered a	agent, or both, i n the	State of Flori	ida. I am fa	amiliar with, a	and accept	
SIGNATURE_	Signature, typed or printed name of registered age	E: Registered Agent signature r	required v	when reinstating)		DATE				
					-					
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550	9. Election Campai Trust Fund Cont	• " —	\$5.0 Adde	00 May Be d to Fees					
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANG	ES TO OFFIC	ERS AND [DIRECTORS	IN 11	
TITLE NAME	PS . VILLAR, OMAR	☐ Delete	TITLE NAME		··			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	3322 SW 175TH AVE MIRAMAR, FL 33029		STREET ADDRESS CITY-ST-ZIP							
TITLE	VT	☐ Delete	TITLE					☐ Change	Addition	
name Street address	VILLAR, TANIA D. 3322 SW 175TH AVE		NAME STREET ADDRESS						-	
CITY-ST-ZIP	MIRAMAR, FL 33029		CITY-ST-ZIP						1	
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TITLE		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP							
indicated of the cor	dertify that the information supplied wit on this report or supplemental report i poration or the receiver or trustee emp or on an attachment with an address,	is true and accurate and that me	v signature shall have the	he sam 607, Fl	ne legal effect as — if n lorida Statutes; an — d i	nade under oa	ath; that I ar	m an officer o	or director	

3/10/08