


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 26, 2004 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # M68164 1. Entity Name ANCHOR SEAFOOD, INC. |  |
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|---|---|
| Principal Place of Business 10265 SW 70TH STREET MIAMI, FL 33173 US | Mailing Address 6317 S.W. 11TH STREET MIAMI, FL 33144 |
|---|---|

DO NOT WRITE IN THIS SPACE



07092004 No Chg-P CR2E034 (10/03)

| | |
|--|--|
| 4. FEI Number 65-0155969 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required | |

6. Name and Address of Current Registered Agent

**MARTINEZ-MALO, ANTONIO
10265 SW 70 ST.
MIAMI, FL 33173**

**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 \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSTD MARTINEZ-MALO, ANTONIO 10265 SW 70 ST. MIAMI, FL 33173 |
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1000000168328
07/26/04-80009-009 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Antonio Martinez-Malo **Antonio Martinez-Malo** **7/26/04**
PRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #