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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # M94360**

ADMIRAL FISH COMPANY, INC.

| Principal Plac                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ce of Business                                                                                                                                                                                                                                          | Mailing Address                                                                                                                             |                                                                                                                                                                                                                                                           |                                                                                                             | n innenman tine, in in annon vision ditte n                                                                                                                                                                                                                                                                                                                                                                  | ini) bini njari bibli didi         |                                      |
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| C/O RICHARD C. NICHOLS. JR.<br>1375 NW 89 CT BAY 14<br>MIAMI FL 33127                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                         | C/O RICHARD C. NICHOLS. JR.<br>1375 NW 89 CT BAY 14<br>MIAMI FL 33127                                                                       |                                                                                                                                                                                                                                                           | DO NOT WRITE  3. Date Incorporated or Qualifed                                                              | IN THIS SPACE                                                                                                                                                                                                                                                                                                                                                                                                |                                    |                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ,                                                                                                                                                                                                                                                       | •                                                                                                                                           |                                                                                                                                                                                                                                                           |                                                                                                             | 08/16/1988                                                                                                                                                                                                                                                                                                                                                                                                   |                                    |                                      |
| 2. Principal P                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Place of Business                                                                                                                                                                                                                                       | 2a. Mailing Address                                                                                                                         |                                                                                                                                                                                                                                                           |                                                                                                             | 4. FEI Number                                                                                                                                                                                                                                                                                                                                                                                                | Α                                  | pplied For                           |
| 21                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                         | 26                                                                                                                                          |                                                                                                                                                                                                                                                           |                                                                                                             | 65-0070598                                                                                                                                                                                                                                                                                                                                                                                                   |                                    | lot Applicable                       |
| Suite, Apt.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | . #, etc.                                                                                                                                                                                                                                               | Suite, Apt. #, etc.                                                                                                                         |                                                                                                                                                                                                                                                           |                                                                                                             | 5 Certifcate of Status Desired                                                                                                                                                                                                                                                                                                                                                                               |                                    | Additional                           |
| City & Stat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                         | City & State                                                                                                                                |                                                                                                                                                                                                                                                           |                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                              |                                    | tequired                             |
| 23                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                         | 28 City & State                                                                                                                             |                                                                                                                                                                                                                                                           |                                                                                                             | 6. Election Campaign Financing Trust Fund Contribution                                                                                                                                                                                                                                                                                                                                                       | 1                                  | May Be<br>to Fees                    |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Country                                                                                                                                                                                                                                                 | Zip                                                                                                                                         | Country                                                                                                                                                                                                                                                   |                                                                                                             | 8. This corporation owes the current                                                                                                                                                                                                                                                                                                                                                                         |                                    |                                      |
| 24                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 25                                                                                                                                                                                                                                                      | 29                                                                                                                                          | 30                                                                                                                                                                                                                                                        |                                                                                                             | Personal Property Tax.                                                                                                                                                                                                                                                                                                                                                                                       | Yes                                | □No                                  |
| <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 9. Name and Address of Curre                                                                                                                                                                                                                            |                                                                                                                                             |                                                                                                                                                                                                                                                           |                                                                                                             | 10. Name and Address of New Regi                                                                                                                                                                                                                                                                                                                                                                             | istered Agent                      | <del></del>                          |
| NICE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | HOLS, RICHARD C. JR.                                                                                                                                                                                                                                    | •••                                                                                                                                         | 81                                                                                                                                                                                                                                                        | Name                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                              |                                    |                                      |
| 1375                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 5 NW 89 CT # /4                                                                                                                                                                                                                                         |                                                                                                                                             | 82                                                                                                                                                                                                                                                        | Street Add                                                                                                  | dress (P.O. Box Number is Not Acceptable                                                                                                                                                                                                                                                                                                                                                                     | <del>)</del>                       |                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | MI FL 33172                                                                                                                                                                                                                                             |                                                                                                                                             | 83                                                                                                                                                                                                                                                        | -                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                              |                                    | F14 98 1931                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                         |                                                                                                                                             |                                                                                                                                                                                                                                                           |                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                              |                                    |                                      |
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| The state of the s | to the provisions of Costions CO7 OF                                                                                                                                                                                                                    | 02 and 607 1508 Florida Statut                                                                                                              | ter the should                                                                                                                                                                                                                                            |                                                                                                             | possible submite this statement for the sur                                                                                                                                                                                                                                                                                                                                                                  |                                    |                                      |
| office or r                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | registered agent, or both, in the State<br>am familiar with, and accept the oblig                                                                                                                                                                       | e of Florida. Such change was a pations of, Section 607.0505, Flo                                                                           | authorized by<br>orida Statutes                                                                                                                                                                                                                           | the corporat                                                                                                | poration submits this statement for the pur<br>ion's board of directors. I hereby accept th                                                                                                                                                                                                                                                                                                                  | ne appointment as r                | s registered<br>egistered            |
| agent. I a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | registered agent, or both, in the State<br>am familiar with, and accept the oblig<br>Signature, typed or printed name of registered ap-                                                                                                                 | e of Florida. Such change was a<br>lations of, Section 607.0505, Flo                                                                        | authorized by<br>orida Statutes<br>Registered Agen                                                                                                                                                                                                        | the corporat                                                                                                | ion's board of directors. I hereby accept the                                                                                                                                                                                                                                                                                                                                                                | ne appointment as r                | egistered                            |
| office or r<br>agent. I a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | registered agent, or both, in the State<br>am familiar with, and accept the oblig<br>Signature, typed or printed name of registered ap-                                                                                                                 | e of Florida. Such change was a pations of, Section 607.0505, Flo                                                                           | authorized by<br>orida Statutes                                                                                                                                                                                                                           | the corporat                                                                                                | ion's board of directors. I hereby accept the directors of the directors. | ne appointment as r                | egistered                            |
| office or radius agent. I a SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | registered agent, or both, in the State<br>am familiar with, and accept the oblig<br>Signature, typed or printed name of registered age<br>OFFICERS A                                                                                                   | e of Florida. Such change was a<br>jations of, Section 607.0505, Flo<br>ent and title if applicable. (NOTE<br>IND DIRECTORS                 | authorized by<br>orida Statutes<br>Registered Agen                                                                                                                                                                                                        | the corporat                                                                                                | ion's board of directors. I hereby accept the                                                                                                                                                                                                                                                                                                                                                                | DATE  ERS AND DIRECT               | ORS IN 12                            |
| office or range agent. I a SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | registered agent, or both, in the State am familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AI                                                                                                           | e of Florida. Such change was a<br>jations of, Section 607.0505, Flo<br>ent and title if applicable. (NOTE<br>IND DIRECTORS                 | authorized by orida Statutes E: Registered Agen 13. 1.1 TITLE                                                                                                                                                                                             | the corporat                                                                                                | ion's board of directors. I hereby accept the directors of the directors. | DATE  ERS AND DIRECT               | ORS IN 12                            |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | registered agent, or both, in the State im familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AI PS NICHOLS JR., RICHARD C. 1375 NW 89 CT MIAMI FL                                                         | e of Florida, Such change was a jations of, Section 607.0505, Florent and title if applicable. (NOTE ND DIRECTORS                           | authorized by orda Statutes  Registered Agen  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-ST                                                                                                                                                           | the corporat                                                                                                | ion's board of directors. I hereby accept the directors of the directors. | DATE  ERS AND DIRECT  Change       | ORS IN 12                            |
| SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | registered agent, or both, in the State im familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AI PS NICHOLS JR., RICHARD C. 1375 NW 89 CT MIAMI FL VP                                                      | e of Florida. Such change was a<br>jations of, Section 607.0505, Flo<br>ent and title if applicable. (NOTE<br>IND DIRECTORS                 | E: Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE                                                                                                                                                                               | the corporat                                                                                                | ion's board of directors. I hereby accept the directors of the directors. | DATE  ERS AND DIRECT               | ORS IN 12                            |
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| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | registered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AT PS NICHOLS JR., RICHARD C. 1375 NW 89 CT MIAMI FL VP MARITNEZ, JORGE 1375 N.W. 89TH CT., #14 MIAMI FL     | e of Florida, Such change was a jations of, Section 607.0505, Florent and little if applicable. (NOTE ND DIRECTORS DELETE                   | E: Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S                                                                                                                                                | t signature requirer ADDRESS                                                                                | ion's board of directors. I hereby accept the directors of the directors. | DATE ERS AND DIRECT Change         | ORS IN 12 Addition                   |
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| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | registered agent, or both, in the State in familiar with, and accept the oblig  Signature, typed or printed name of registered age  OFFICERS AI  PS NICHOLS JR., RICHARD C. 1375 NW 89 CT MIAMI FL  VP MARITNEZ, JORGE 1375 N.W. 89TH CT., #14 MIAMI FL | e of Florida, Such change was a jations of, Section 607.0505, Florent and little if applicable. (NOTE ND DIRECTORS DELETE                   | inthorized by prida Statutes  Registered Agen  1.1 TITLE  1.2 NAME  1.3 STREET  2.1 TITLE  2.2 NAME  2.3 STREET  2.4 CITY-S  3.1 TITLE  3.2 NAME  3.3 STREET  3.4 CITY-S  4.1 TITLE                                                                       | t signature requir ADDRESS 1-ZIP ADDRESS T-ZIP ADDRESS                                                      | ion's board of directors. I hereby accept the directors of the directors. | DATE ERS AND DIRECT Change         | DRS IN 12 Addition Addition          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  NAME  NAME  NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | registered agent, or both, in the State in familiar with, and accept the oblig  Signature, typed or printed name of registered age  OFFICERS AI  PS NICHOLS JR., RICHARD C. 1375 NW 89 CT MIAMI FL  VP MARITNEZ, JORGE 1375 N.W. 89TH CT., #14 MIAMI FL | e of Florida, Such change was a jations of, Section 607.0505, Florent and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE         | E: Registered Agen  13. 1.1 TITLE 12 NAME 13 STREET 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 32 NAME 33 STREET 34. CITY-S 4.1 TITLE 4.2 NAME                                                                                                     | t signature requir  ADDRESS 1- ZIP  ADDRESS 1- ZIP  ADDRESS 1- ZIP                                          | ion's board of directors. I hereby accept the directors of the directors. | DATE ERS AND DIRECT Change         | ORS IN 12 Addition Addition          |
| SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | registered agent, or both, in the State in familiar with, and accept the oblig  Signature, typed or printed name of registered age  OFFICERS AI  PS NICHOLS JR., RICHARD C. 1375 NW 89 CT MIAMI FL  VP MARITNEZ, JORGE 1375 N.W. 89TH CT., #14 MIAMI FL | e of Florida, Such change was a pations of, Section 607.0505, Florent and title if applicable. (NOTE ND DIRECTORS DELETE DELETE             | E: Registered Agen  13. 1.1 TITLE 12 NAME 13 STREET 14 CITY-S1 2.1 TITLE 22 NAME 2.3 STREET 3.4 CITY-S 3.1 TITLE 32 NAME 33 STREET 34. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET                                                                               | t signature requir  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP                              | ion's board of directors. I hereby accept the directors of the directors. | DATE ERS AND DIRECT Change         | ORS IN 12 Addition Addition          |
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

**FILED** 

Jan 22, 1999 8:00am

**Secretary of State** 01-22-1999 90036 020 \*\*\*150.00

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