

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000646

FILED
Feb 28, 2007
Secretary of State

Entity Name: FISHERAMA, INC.

Current Principal Place of Business:

8399 NW 30 TERRACE
DORAL, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

8399 NW 30 TERRACE
DORAL, FL 33122 US

New Mailing Address:

FEI Number: 65-0401598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNY, JIM
8399 NW 30 TERRACE
DORAL, FL 33122 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: DENNY, JIM
Address: 10910 S.W. 136TH CT.
City-St-Zip: MIAMI, FL 33186

Title: PRES () Delete
Name: PATTERSON, BOB
Address: 2342 W 80 STREET # 1
City-St-Zip: HIALEAH, FL 33016

Title: DIR () Delete
Name: DOSAL, ALBERTO
Address: 8399 NW 30 TERRACE
City-St-Zip: DORAL, FL 33122

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR (X) Change () Addition
Name: PATTERSON, BOB
Address: 2342 W 80 STREET # 1
City-St-Zip: HIALEAH, FL 33016

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES () Change (X) Addition
Name: ARCH, ALLAN
Address: 3685 NW 106 STREET
City-St-Zip: MIAMI, FL 33147

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTO DOSAL

DIR

02/28/2007

Electronic Signature of Signing Officer or Director

Date