

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007853

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: FIRST TEE SEAFOODS, INC.

## Current Principal Place of Business:

P.O. BOX 630446  
OJUS BRANCH, FL 33163

## New Principal Place of Business:

590 NE 185TH STREET  
N MIAMI, FL 33179

## Current Mailing Address:

P.O. BOX 630446  
OJUS BRANCH, FL 33163

## New Mailing Address:

FEI Number: 65-0990711      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DADE COUNTY CORPORATE AGENTS, INC.  
20801 BISCAYNE BLVD., STE. 505  
MIAMI, FL 33180 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KROHN, TIMOTHY  
Address: 6041 SW 17 CT  
City-St-Zip: PLANTATION, FL 33317

Title: VP ( ) Delete  
Name: BARNETT, PAUL  
Address: 1668 DIPLOMAT DR  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: ST ( ) Delete  
Name: BRESLOW, LYNN  
Address: 20827 NE 30 CT  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL BARNETT

VP

03/11/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date