


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P0000069942

1. Entity Name
MIAMI RIVER LOBSTER AND STONE CRAB CORPORATION



Principal Place of Business
**135 SW S RIVER DRIVE
 MIAMI, FL 33130**

Mailing Address
**135 SW S RIVER DRIVE
 MIAMI, FL 33130**



01232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1027465

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PRIEGUEZ, MANUEL
 135 SW S RIVER DRIVE
 MIAMI, FL 33130**

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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRIEGUEZ, MANUEL J 135 SW S RIVER DRIVE MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD PRIEGUEZ, MANUEL 135 SW S RIVER DRIVE MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PRIEGUEZ, RAQUEL 135 SW S RIVER DRIVE MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 02/08/08-80069-015 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: MPJ **1-28-08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #