## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000078057

City-St-Zip:

WESTON, FL 33331 US

FILED Aug 14, 2007 Secretary of State

Entity Name: INDUMAR SEAFOOD, CORP. **Current Principal Place of Business: New Principal Place of Business:** 2853 EXECUTIVE PARK DRIVE 2729 SW 137 TERR SUITE 201 MIRAMAR, FL 33027 US WESTON, FL 33331 **New Mailing Address: Current Mailing Address:** P.O. BOX 267186 WESTON, FL 33331 US FEI Number: 65-1033851 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANEZ, CARLA RINCON, EDWIN 2729 SW 137 TERR 2853 EXECUTIVE PARK DRIVE MIRAMAR, FL 33027 US SUITE 201 WESTON, FL 33331 US 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: EDWIN RINCON 08/14/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition RINCON, EDWIN Name: Name: 2853 EXECUTIVE PARK DRIVE Address: Address: City-St-Zip: WESTON, FL 33331 US City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: OSORIO, ALFREDO Name: 2853 EXECUTIVE PARK DRIVE Address: Address: WESTON, FL 33331 US City-St-Zip: City-St-Zip: Title: Title: TD (X) Delete () Change () Addition ANEZ, CARLA J Name: Name: 2853 EXECUTIVE PARK DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: EDWIN RINCON PRES 08/14/2007