2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

May 06, 2004 8:00 am Secretary of State 04-19-2004 90363 014 ***158.75 **DOCUMENT # P00000111547** SEA CHEFS INTERNATIONAL CORP. Principal Place of Business Mailing Address 66419735 2601 HALISSEE ST 2601 HALISSEE ST COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133 2. Principal Place of Business 3. Mailing Address Surte. Apt. #. etc. Suite, Apt. #, etc. 04122004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-1140070 Not Applicable Zìp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NAKHJAVAN, BIJAN I-2601 HALISSEE ST Street Address (P.O. Box Number is Not Acceptable) **COCONUT GROVE, FL 33133** City Zip Code 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 reinstati DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fe OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE Detete 1m F ☐ Addition ☐ Change NAKHJAVAN, BIJAN I NAME NAME 2601 HALISSEE ST STREET ADDRESS STREET ADORESS COCONUT GROVE, FL 33133 CITY-ST-7/P CZTY-ST-ZIP ☐ Addition ☐ Delete ROUHANI, FARHANG NAME NAME STREET ADDRESS 212 SHORE DR., SOUTH STREET ADDRESS CITY-ST-ZIP COCONUT GROVE, FL 33133 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IME ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP 12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 attackment with an address, with all other like empowered.

FILED