

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000107955

1. Entity Name  
SEAFOOD INVESTMENTS OF HOLLYWOOD, INC.



**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90135 017 \*\*\*150.00

0362746 AV

Principal Place of Business  
1290 WESTON RD. STE 300  
WESTON FL 33326

Mailing Address  
1290 WESTON RD. STE 300  
WESTON FL 33326

11029734



2. Principal Place of Business

5001 S University Dr

Suite, Apt. #, etc.  
K

3. Mailing Address

5001 S University Dr

Suite, Apt. #, etc.  
K

☐ CHECK HERE IF MAKING CHANGES

City & State

Davie

City & State

Davie

4. FEI Number

65-1159168

Applied For

Not Applicable

Zip

33328

Country

USA

Zip

33328

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LEGAL INFORMATION SERVICES, INC.  
5001 S UNIVERSITY DR, STE A  
DAVIE FL 33328

7. Name and Address of New Registered Agent

Name: Mark A Bernstein CPA, PA  
Street Address (P.O. Box Number is Not Acceptable)  
5001 S University Dr, Ste K  
City: Davie FL Zip Code: 33328

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 the registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: D  
NAME: OCHOA, CARLOS  
STREET ADDRESS: 5001 S UNIVERSITY DR, STE A  
CITY-ST-ZIP: WESTON FL 33326

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
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CITY-ST-ZIP:

TITLE: ☐ Delete  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☒ Change ☐ Addition  
NAME:  
STREET ADDRESS: 5001 S University Dr, Ste K  
CITY-ST-ZIP: Davie, FL 33328

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition  
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CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

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 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 or other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/28/03 (954) 434-2202

CR2E034 (10/02)