2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91415 032 ***150.00

DOCUMENT # P02000027582

1. Entity Name
FRESH FISH BETANIA, INC.

Principal Place of Business	Mailing Address
8841 NW 78 St #419 TAMARAC Fl 33321	8841 NW 78 St #419 TAMARAC Fl 33321

2. Principal Place of Business		3. Mailing Address	
		7105 SW 8 St	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 309	
City & State		City & State Miami Fl	
Zip	Country	Zip 33144	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 01-0626737 ☐ Applied F ☐ Not Appl

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

6. Name and Address of Current Registered Agent

MEDINA Francisco J.
8841 NW 78 St #419
Tamarac Fl 33321

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 ac the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FEE 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** Ma Added to Fe

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
TITLE / NAME: MEDINA Francisco STREET ADDRESS: 8841 NW 78 St #419 CITY-ST-ZIP: Tamorock Fl 33321	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐
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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 inform 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 dir 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 Bloc changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Francisco Medina 4/28/03 (305)226-3447
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #