

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90132 021 ***150.00

DOCUMENT # P02000027773

1. Entity Name
DIRECTED SHARK FISHERIES INC.



Principal Place of Business
**1045 W. INTERNATIONAL BLVD.
DAYTONA BEACH FL 32114**

Mailing Address
**1045 W. INTERNATIONAL BLVD.
DAYTONA BEACH FL 32114**



2. Principal Place of Business
**1045 WEST INTERNATIONAL
Suite, Apt. #, etc.
SPEEDWAY BLVD.**

3. Mailing Address
**PO BOX 11604
Suite, Apt. #, etc.**

☐ CHECK HERE IF MAKING CHANGES

City & State
DAYTONA BEACH, FL.
Zip
32114-3432
Country
Uolusia

City & State
DAYTONA BEACH, FL
Zip
32120-1604
Country
Uolusia

4. FEI Number
EIN-03-0403979
Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**FOSTER, WM. M
555 WESTMORELAND RD.
DAYTONA BEACH FL 32114-2423**

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 accept the obligations of registered agent.

SIGNATURE _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, WM. M 555 WESTMORELAND RD. DAYTONA BEACH FL 32114-2423	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUDSON, RUSSELL H 1045 W. INTERNATIONAL BLVD. DAYTONA BEACH FL 32114	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZAMORA, L. SAUNDRA 1045 W. INTERNATIONAL BLVD. DAYTONA BEACH FL 32114	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V 1045 W. International Speedway Blvd. DAYTONA BEACH, FL 32114-3432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	F 1045 W. International Speedway Blvd. DAYTONA BEACH, FL 32114-3432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 all other like empowerments.

SIGNATURE: **Richard A. [Signature]** **March 28, 2003** **386-239-0948**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)