

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045187

FILED
May 03, 2004
Secretary of State

Entity Name: DORAL LAKES SEAFOOD, INC.

Current Principal Place of Business:

15480 N.W. 77 CT.
STORE #310
MIAMI LAKES, FL 33016

New Principal Place of Business:

Current Mailing Address:

15480 N.W. 77 CT.
STORE #310
MIAMI LAKES, FL 33016

New Mailing Address:

FEI Number: 01-0673075 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, JORGE LUIS
11256 NW 51 TERR
MIAMI, FL 33178

Name and Address of New Registered Agent:

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: _____

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:

Title: P () Delete
Name: LOPEZ, JORGE LUIS
Address: 11256 NW 51 TERR
City-St-Zip: MIAMI, FL 33178

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: LOPEZ, GLORIA
Address: 15480 NW 77 COURT, STORE 310
City-St-Zip: MIAMI LAKES, FL 33016

Title: VTP () Change (X) Addition
Name: LOPEZ, JORGE L
Address: 15480 NW 77 COURT, STORE 310
City-St-Zip: MIAMI LAKES, FL 33016

Title: VTP () Change (X) Addition
Name: ROJAS, MARIA T
Address: 11256 NW 51 TERRACE
City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: GLORIA LOPEZ

PDT

05/03/2004

Electronic Signature of Signing Officer or Director

_____ Date