

2004 FOR PROFIT CORPORATION ANNUAL REPORT

06-28-2004 900T2 01T ***150.00

FILED P03000120827

04 AUG 20 PM 4:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06242004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000120827

1. Entity Name
J & J SEAFOOD INC



Principal Place of Business
6001 NW 153RD STREET
SUITE F
MIAMI LAKES, FL 33014

Mailing Address
6001 NW 153RD STREET
SUITE F
MIAMI LAKES, FL 33014

2. Principal Place of Business:

3. Mailing Address:

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
32-0096920

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FRANCOIS, DEJACMAR
8420 NW 5TH STREET
PEMBROKE PINES, FL 33024

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	FRANCOIS, DEJACMAR	
STREET ADDRESS	8420 NW 5TH STREET	
CITY-STATE-ZIP	PEMBROKE PINES, FL 33024	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/04

(305) 825-3355

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2 of 2

J & J seafood, Inc
6001 n m 153rd street, suite F
Miami lakes, fl 3014

August 24, 2004

Att: Barbara

Per our phone conversation this letter is to testify that I have not received you letter dating June 29 2004 regarding incorrect Federal Employer Identification (FEI) Number.

The correct FEI number is: 32-0096920.

Please make the proper correction and wave the late Fee. Any questions feel free to contact me at : tel. 305 825-335 or fax: 305 825-7488

Best regards


Desmar Francis
President, Owner