

2006 FOR PROFIT CORPORATION ANNUAL REPORT

APPROVED
AND
FILED

06 SEP 14 PM 3:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ASC



09132006 Chg-P CR2E034 (11/05)

DOCUMENT # P04000098175 1. Entity Name SEAFOOD INTERNATIONAL INC.			
Principal Place of Business 7555 NW 63RD STREET MIAMI, FL 33166		Mailing Address 3169 WEST 68 PL HIALEAH, FL 33018	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 7555 NW 63rd Street Suite, Apt. #, etc.	
City & State miami, Florida		City & State miami, Florida	
Zip 33166		Country USA	
4. FEI Number 14-1911227		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CASTILLO, GIZELA RUIZ 3169 WEST 68 PL HIALEAH, FL 33018		7. Name and Address of New Registered Agent Name Luis A Castillo Street Address (P.O. Box Number is Not Acceptable) 7555 NW 63rd Street City miami FL Zip Code 33166	
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 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>		DATE September 13, 2006	
FILE NOW!!! FEE IS \$150.00 Due by September 15, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P NAME CASTILLO, LUIS A STREET ADDRESS 3169 WEST 68 PL CITY-ST-ZIP HIALEAH, FL 33018	<input type="checkbox"/> Delete	TITLE 000079946190 NAME 09/13/06--01033--001 STREET ADDRESS **150.00 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VP NAME CASTILLO, GIZELA R STREET ADDRESS 3169 WEST 68 PL CITY-ST-ZIP HIALEAH, FL 33018	<input type="checkbox"/> Delete	TITLE EXECUTIVE DIRECTOR NAME CASTILLO ALVARO M STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE EXECUTIVE DIRECTOR NAME CASTILLO PORTIRIO A STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Delete	TITLE EXECUTIVE DIRECTOR NAME CASTILLO PORTIRIO A STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME CASTILLO, GIZELA R STREET ADDRESS 3169 WEST 68 PL CITY-ST-ZIP HIALEAH, FL 33018	<input type="checkbox"/> Delete	TITLE EXECUTIVE DIRECTOR NAME CASTILLO ALVARO M STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME CASTILLO, GIZELA R STREET ADDRESS 3169 WEST 68 PL CITY-ST-ZIP HIALEAH, FL 33018	<input type="checkbox"/> Delete	TITLE EXECUTIVE DIRECTOR NAME CASTILLO ALVARO M STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME CASTILLO, GIZELA R STREET ADDRESS 3169 WEST 68 PL CITY-ST-ZIP HIALEAH, FL 33018	<input type="checkbox"/> Delete	TITLE EXECUTIVE DIRECTOR NAME CASTILLO ALVARO M STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME CASTILLO, GIZELA R STREET ADDRESS 3169 WEST 68 PL CITY-ST-ZIP HIALEAH, FL 33018	<input type="checkbox"/> Delete	TITLE EXECUTIVE DIRECTOR NAME CASTILLO ALVARO M STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE VP NAME CASTILLO, GIZELA R STREET ADDRESS 3169 WEST 68 PL CITY-ST-ZIP HIALEAH, FL 33018	<input type="checkbox"/> Delete	TITLE EXECUTIVE DIRECTOR NAME CASTILLO ALVARO M STREET ADDRESS 7555 NW 63rd Street CITY-ST-ZIP miami, FL 33166	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE September 13, 2006 <small>Date</small>	
		Daytime Phone #	