

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000009436

Entity Name: SOUTH BEACH SEAFOOD, INC.

FILED
Mar 21, 2008
Secretary of State

Current Principal Place of Business:

499 EAST PALMETTO ROAD
SUITE 228
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

P.O. BOX
1738
ATLANTA, GA 303244887 US

New Mailing Address:

FEI Number: 20-2135753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEARCE, DAVID
Address: 1144 WEST GRIFFIN ROAD
City-St-Zip: LAKELAND, FL 33805

Title: CD () Delete
Name: WATKINS, GEORGE
Address: 1144 WEST GRIFFIN ROAD
City-St-Zip: LAKELAND, FL 33805

Title: D () Delete
Name: WATKINS, JOHN
Address: 1144 WEST GRIFFIN ROAD
City-St-Zip: LAKELAND, FL 33805

Title: V (X) Delete
Name: SMITH, EDWARD
Address: 1144 WEST GRIFFIN ROAD
City-St-Zip: LAKELAND, FL 33805

Title: ST () Delete
Name: READY, GEORGE
Address: 1958 MONROE DR., NE
City-St-Zip: ATLANTA, GA 30324

Title: S () Delete
Name: WATKINS, MICHAEL
Address: 1958 MONROE DR., NE
City-St-Zip: ATLANTA, GA 30324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LORI PHILLIPS

Electronic Signature of Signing Officer or Director

CONT

03/21/2008

_____ Date