2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 13, 2006 8:00 am
Secretary of State
08-21-2006 90005 029 ***550.00

DOCUMENT # P05000125052

1. Entity Name
THE FISH LADY SEAFOOD CO., INC.

Principal Place of Business	Mailing Address
6712 HIGHLAND PINES CIRCLE FT MYERS FL 33912	6712 HIGHLAND PINES CIRCLE FT MYERS FL 33912

2nd MOORE CR2E034 (4/06)

2. Principal Place of Business	3. Mailing Address
10241 Metro Pkwy	10241 Metro Pkwy
Suite, Apt. #, etc. #111	Suite, Apt. #, etc. #111
City & State Ft Myers, Fl	City & State Ft Myers, Fl
Zip 33966 Country USA	Zip 33966 Country USA

4. FEI Number 59-3818610 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BULIFANT, SUSAN S
6712 HIGHLAND PINES CIRCLE
FT MYERS FL 33912

Change of zip code →

7. Name and Address of New Registered Agent

Name Susan S Bulifant
Street Address (P.O. Box Number is Not Acceptable) 6712 Highland Pines Circle
City Ft Myers FL Zip Code 33966

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 Susan S Bulifant 8/15/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
DUE BY September 6, 2006
Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the $400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is $150.00. ☐

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BULIFANT, SUSAN S 6712 HIGHLAND PINES CIRCLE FT MYERS FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUILIFANT, ROBERT B JR 6712 HIGHLAND PINES CIRCLE FT MYERS FL 33912	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: Susan S Bulifant 8/15/06 239-275-3236
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #