## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Mar 30, 2000 8:00 am Secretary of State DOCUMENT # P92000004084 1. Entity Name GARCIA SEAFOOD GRILLE & FISH MARKET, INC. 03-30-2000 90052 015 \*\*\*158.75 Principal Place of Business Mailing Address 398 NW NORTH RIVER DR 398 NW NORTH RIVER DR MIAMI FL 33128-1626 MIAMI FL 33128 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0370663 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GARCIA, ESTABAN JR. Street Address (P.O. Box Number is Not Acceptable) 398 NW N RIVER DR MIAMI FL 33128 Zip Code 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ■ Addition TITLE □ Delete NAME GARCIA, ESTEBAN L STREET ADDRESS 398 NW NORTH RIVER DR CITY-ST-ZIP MIAMI FL 33128 ☐ Change Addition TD ☐ Delete TITLE GARCIA. ESTEBAN NAME 398 NW NORTH RIVER DR STREET ADDRESS

TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33128** ☐ Change ☐ Addition ☐ Delete TITLE GARCIA. LUIS NAME \* NAME STREET ADDRESS STREET ADDRESS 398 NW NORTH RIVER DR CITY-ST-ZIP CITY-ST-ZIE **MIAMI FL 33128** ☐ Change Addition ☐ Delete TITLE GARCIA, MARIA L NAME STREET ADDRESS 398 NW NORTH RIVER DRIVE STREET ADDRESS CHTY-ST-ZIP CITY-ST-7IP MIAMI FL 33128 ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 accuracy 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 11 or Block 12 if

SIGNATURE:

changed, or on an attachment with an

Daytime Phone #