## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P93000006773**1. Corporation Name

DOCKSIDE SEAFOOD, INC.

Principal Place of Business	
772 NORTHLAKE BLVD.	

Mailing Address

## **FILED** Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90051 016 \*\*\*150.00



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Suite, Apt.	#, GIC.	27				5. Certifcate of Status Desir	ed 🗆	Fee F	Required
22)		City & State				6. Election Campaign Finan	cina -	\$5.00	May Be
City & State	е .	<b>⊢</b> ′				Trust Fund Contribution			to Fees
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Zip	Zip Country Zip		Country			This corporation owes the Personal Property Tax.	e current year	Yes	₩ No
24	25	29	30			10. Name and Address of	low Pagistar		
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of I	ew Kegistei	eu Agent	
DEIT	TO LAMED C			°'	Name				
	Z JAMES C			82	Street Addre	ess (P.O. Box Number is Not Ac	ceptable)		
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44 Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Statut	tes, the ab	ove-	named corpo	oration submits this statement for	r the purpose	of changing i	ts registered
office or F	registered agent or both in the State	of Fiorida, Such change was a	uunnnzea	יו עם	ne corporatio	on's board of directors. I hereby	accept the ap	pointment as	registerea
agent. I a	m familiar with, and accept the obligation	mons of, Section 607.0303, Fig.	nua siaiu	163.			.*		
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SIGNATURE	All the state of t	ot and title if applicable /NOTE	- Registered	Agent 8	signature required	d when reinstating)	DATE		
	Signature, typed or printed name of registered agen			Agent s	signature required	d when reinstating)  ADDITIONS/CHANGES T			FORS IN 12
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, of on an attachment with application, with all other like empowered.

SIGNATURE