FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 8:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000041709 (5)**

1. Corporate Name

MAINE LOBSTER-LINK, INC.

Principal Place of Business

1101 SOUTH DIXIE HWY
POMPANO BCH FL 33060
US

Mailing Address

50 SE KINDRED ST., #107
STUART FL 34994
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/07/1993**

3a. Date of Last Report: **04/28/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. # or Bldg. — 22

Suite, Apt. # or Bldg. — 27

City & State — 23

City & State — 28

24 25 29 30

4. FEI Number: **65-0416412** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

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

8. This corporation has agreed to indemnify its officers and directors as provided by Section 607.0850, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

KOHL, N. DEAN JR
50 KINDRED ST., #107
SUITE 400
STUART FL 34994

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Numbers Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1008, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12.		13.		
Title	D	Title	P	☒ Change ☐ Addition
Name	KOHL, DEAN N. JR.	Name	Reed, Mark	
Street Address	50 KINDRED ST., #107	Street Address	P.O. Box 2722 N/A	
City-St-Zip	STUART FL	City-St-Zip	Stuart, FL	
Title	D	Title	D	☒ Change ☐ Addition
Name	MCKEY, JOHN D. JR.	Name	Tsairis, Gregory P.	
Street Address	2081 EAST OCEAN BLVD.	Street Address	1 Water Street	
City-St-Zip	STUART FL	City-St-Zip	Kittery, ME	
Title	D	Title	D	☐ Change ☒ Addition
Name	TSAIRIS, GREGORY P.	Name	Kenney, Daniel B	
Street Address	1 WATER STREET	Street Address	PO Box 1210	
City-St-Zip	KITTERY ME	City-St-Zip	Westport, Nova Scotia	
Title	P	Title		☐ Change ☐ Addition
Name	REED, MARK	Name		
Street Address	P.O. BOX 2722 N/A	Street Address		
City-St-Zip	STUART FL	City-St-Zip		
Title		Title		☐ Change ☐ Addition
Name		Name		
Street Address		Street Address		
City-St-Zip		City-St-Zip		
Title		Title		☐ Change ☐ Addition
Name		Name		
Street Address		Street Address		
City-St-Zip		City-St-Zip		

14. I hereby certify that the information supplied with this filing is accurately reported and 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 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 with an address.

SIGNATURE: X Mark Reed 4/21/95 (305) 941-6050

MARK REED
TYPE OR PRINT NAME OF SIGNING OFFICER OR DIRECTOR

0381038 CP