FILED
May 02, 2007 08:00 AM
Secretary of State

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P93000066981

1. Entity Name
NEPTUNE FISH MARKET, INC.

Principal Place of Business	Mailing Address
531 NO. DIXIE HWY. LAKE WORTH, FL 33460 US	531 NO. DIXIE HWY. LAKE WORTH, FL 33460 US

DO NOT WRITE IN THIS SPACE

04302007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0435599
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GIAMPORCARO, VINCENT
5597 DESCARTES CIR
BOYNTON BEACH, FL 33437

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11. 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

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

U00000754001
05/22/07-80043-012 150.00

10.	OFFICERS AND DIRECTORS
TITLE	DP
NAME	GIAMPORCARO, VINCENT
STREET ADDRESS	5597 DESCARTES CIR
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	DVS
NAME	GIAMPORCARO, THERESA
STREET ADDRESS	5597 DESCARTES CIR
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	T
NAME	GIAMPORCARO, JOSEPHINE
STREET ADDRESS	5597 DESCARTES CIR
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	S
NAME	GIAMPORCARO, CONCETTA
STREET ADDRESS	5597 DESCARTES CIR
CITY-ST-ZIP	BOYNTON BEACH, FL 33437
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: VINCENT GIAMPORCARO (PRES.) 4-29-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #