

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

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90177 049 ***150.00

DOCUMENT # P93000082467

1. Corporation Name

SEAFOOD HOUSE, INCORPORATED

Principal Place of Business

2851 N.E. 46TH STREET
LIGHTHOUSE POINT FL 33064

Mailing Address

1152 S.W. 20TH STREET
BOCA RATON FL 33486
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/23/1993

4. FEI Number

65-0456705

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 owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 398 N. CONGRESS AVE.

Suite, Apt. #, etc.

22 City & State BOYNTON BCH FL

23 Zip 33426 Country USA

24 33426 25 USA

2a. Mailing Address

26 756 CAMINO LAKES CIRCLE

Suite, Apt. #, etc.

27 City & State BOCA RATON FL

28 Zip 33486 Country USA

29 33486 30 USA

9. Name and Address of Current Registered Agent

CHILDS, SUSAN
1152 U.S. 20TH STREET
BOCA RATON FL 33442

81 Name

SUSAN CHILDS

82 Street Address (P.O. Box Number is Not Acceptable)

756 CAMINO LAKES CIRCLE

83

BOCA RATON, FL 33486

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Susan Childs

Signature, typed or printed name of registered agent and title if applicable (NOT: Registered Agent signature required when reinstating)

DATE

4/20/99

12. OFFICERS AND DIRECTORS

TITLE PST
NAME LABARBERA, NICHOLAS
STREET ADDRESS 540 JEFFERSON DRIVE APT. 110
CITY-ST-ZIP DEERFIELD BEACH FL 33442

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME NICHOLAS LABARBERA
1.3 STREET ADDRESS 564 VIA GENOVA DRIVE
1.4 CITY-ST-ZIP DEERFIELD BCH, FL 33442

2.1 TITLE Vice-President
2.2 NAME SUSAN CHILDS
2.3 STREET ADDRESS 756 CAMINO LAKES CIRCLE
2.4 CITY-ST-ZIP BOCA RATON, FL 33486

3.1 TITLE John Stille - Secretary
3.2 NAME 864 Berkeley St.
3.3 STREET ADDRESS BOCA RATON, FL
3.4 CITY-ST-ZIP 33487

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 or on an attachment with an address, with a letter like empowered.

SIGNATURE:

Nicholas LaBarbera
NICHOLAS LABARBERA, President

4/20/99 (561) 394-8772
Date Daytime Phone #

CR2E034 (11/98)