SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Aug 18 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000087638 (1)

| ROCK | FISH FARMS INC. | , | , | 1 114 (1841 NR 12100 NA) (4416) BOOM | |
|--|--|----------------------------------|---|---|--|
| | | | | | |
| 1 | ce of Business | Mailing Address | | | 80 80 10 10 81 11 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| 6400 GEORGIA AVE P C BOX 3863 WEST PALM BEACH FL 33407 LANTANA FL 33465 US | | | | DO NOT WRITE IN THIS SPACE | |
| | | 00 | | 3. Date Incorporated or Qualified | |
|] | | | | 12/23/1993 | 02/07/1996 |
| 2. Principal F | Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 65-0457930 | Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| City & State | | 27 | | | Fee Required |
| 23 | | City & State | | 6. Election Campaign Financing | \$5.00 Мау Ве |
| Zip | Country | 28 Zip | Country | Trust Fund Contribution | Added to Fees |
| 24 | 25 | 29 | 30 | 8. This corporation owes or has p Personal Property Tax due Jun | _ · _ · |
| | 9, Name and Address of Curre | | 130 | 10. Name and Address of New R | |
| CARRADATE COSTITUCIO EL PROPERTIDAD LA CARRADA DE LA CARRA | | | | OMAN LEAS | |
| 4521 PGA BLVD | | | | ess (P.O. Box Number is Not Accepta | oblo) |
| PALM BEACH GARDENS FL 33418 | | | | . ATCANTIC OR. | adie) |
| | | | 83 | | |
| | | | 84 City AN | +AUA- | FL 85 Zip Code 2 |
| L. 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above passed corpora | | | | oration pubmits this statement for the | numana at abancias its sociational |
| 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, Florid Stylutes. | | | | | |
| SIGNATURE | GOMAN LEAS | galions of, Section 607,0303, F | Wreten Lein | フィ | 130/97 |
| SIGNATURE | Signature, lypod or printed name of registered a | gest and lifte if applicable (NC | TE: Registered Agrill signature require | ed when reinstaling) | DATE |
| 12. | OFFICERS A | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| TITLE | D | ☐ DELETE | 11 THELE | | ☐ Change ☐ Addition |
| NAME | LEAS, RODMAN | | 1.2 NAME | | |
| STREET ADDRESS | % 6400 GEORGIA AVE | 407 | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | WEST PALM BEACH FL 334 | OFLETE | 1.4 C(TY-S1-Z(P | | |
| NAME | | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition |
| STREET ADDRESS | | | 2.2 NAME | | |
| CITY-ST-ZIP | | | 2.3 STREET ADDRESS | | |
| TITLE | | DELETE | 2. 4 CITY - ST - ZIP 3.1 TITLE | | Change Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3 4. CITY-ST-ZIP | | |
| TITLE | | DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | and the state of | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | - | | 4.4 CITY - ST - ZIP | | |
| TITLE | , | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STRFFT ADDRESS | | |
| CITY-ST-ZIP | | Flories | 5.4 CITY-ST-ZIP | · · · · · · · · · · · · · · · · · · · | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | İ |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |

14. I do 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 12 if changed, or on an attachment with an address.