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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Mar 14 1997 8:00am

Secretary of State

DOCUMENT # P94000082207 (9)

PHILLIPS SEAFOOD, INC.

Principal Place of Business Mailing Address				T EBBULDEN NIE IENN DIDAN BBUM DDYM DDIM	I DUIGH INGIO FINIS INNIN ONNIN SOON IEDT
1225 BELVEDERE ROAD WEST PALM BEACH FL 33405 US		1225 BELVEDERE ROAD WEST PALM BEACH FL 33405-1009 US			
				3. Date Incorporated or Qualified 11/09/1994	3a. Date of Last Report 03/19/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0534610	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29	30		Yes 🗋 No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Reg	jistered Agent
	ERRY, RICHARD G		81 Name		
	B5 PALM BEACH LAKES BLVD		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
SUITE 600 WEST PALM BEACH FL			83	7 Th. shares	par y balan da
			84 City		85 Zip Code
			Ony		FL 65 210 Code
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508. Florida Statules, 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 Statules.					
SIGNATURE	_				
	Signature, typed or printed name of registeriod ag-		f : Hog storod Agent signature requ		DATE
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PHILLIPS, BRICE R	☐ DELETE	1.1 TOTUE		Change Addition
NAME	2004 PHILADELPHIA AVE		1.2 NAME		
STREET ADDRESS	OCEAN CITY MD 21842		13 STREET ADDRESS		
CITY-ST-ZIP	D D D D D D D D D D D D D D D D D D D	DELETE	1.4 City - St - ZIP		Change Addition
TITLE	PHILLIPS, SHIRLEY K	L. Dutti it	217016		☐ Change ☐ Addition
NAME	2004 PHILADELPHIA AVE		2.2 NAME		
STREET ADDRESS	OCEAN CITY MD 21842		2.3 STREET ADDRESS		
CITY-ST-ZIP	OCEAN CIT MU 21042	Distric	2. 4 CITY - ST - ZIP		
TITLE		☐ DEFETE	3.13016		Change Addition
NAME	1		3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	34. CITY-S1-7/P		Change
TITLE		L Dett it	4 1 111/11		L Change L Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Drutt	4.4 CITY - ST - ZIP		Change Addition
TITLE		DEFELE	5.1 101,6		Change L Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Priese	5 4 CITY-ST-ZIP		
TITLE		L] DELETE	6171114		Change Addition
NAME			6.2 NAME		ļ
STREET ADDRESS	}		6.3 STREET ADDRESS		

CITY-ST-ZIP

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 logal effect as if made under oath; that I am an officer or director of the corporation or the recover 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 it changed, or on an ittachment with an address.