

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 MAR 15 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000084227 (5)

1. Corporation Name

LOBSTER & LOBSTER INC.

Principal Place of Business

1832 MADISON ST #202
HOLLYWOOD FL 33020

Mailing Address

1832 MADISON ST #202
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified

11/17/1994

3a. Date of Last Report

2. Principal Place of Business

21 1103 OGD PRIFIN ROAD

2a. Mailing Address

26 1103 OGD PRIFIN ROAD

4. FEI Number

65-0555654

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 DANIA, FLORIDA

City & State

28 DANIA, FLORIDA

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 33004

Country

25 BRAZIL

Zip

29 33004

Country

30 BRAZIL

8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SIROIS, FERNANDO
1832 MADISON ST #202
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name

CLAUDE RAYMOND

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

1103 OGD PRIFIN ROAD

83

84 City

DANIA

FL

85 Zip Code

33004

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 607.005, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and (if applicable),

(NOTE: Registered Agent signature required when reinstating)

DATE

2/22/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SIROIS, FERNANDO
STREET ADDRESS	1832 MADISON ST #202
CITY-ST-ZIP	HOLLYWOOD FL 33020
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SIROIS, FERNANDO	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	1103 OGD PRIFIN ROAD	
1.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	
2.1 TITLE	D CAROLE LEBREUX	☐ Change ☒ Addition
2.2 NAME		
2.3 STREET ADDRESS	1103 OGD PRIFIN ROAD	
2.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	
3.1 TITLE	PRESIDENT	☐ Change ☒ Addition
3.2 NAME	CLAUDE RAYMOND	
3.3 STREET ADDRESS	1103 OGD PRIFIN ROAD	
3.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	
4.1 TITLE	VICE PRESIDENT	☐ Change ☒ Addition
4.2 NAME	CAROLE LEBREUX	
4.3 STREET ADDRESS	1103 OGD PRIFIN ROAD	
4.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	
5.1 TITLE	SECRETARY	☐ Change ☒ Addition
5.2 NAME	CAROLE LEBREUX	
5.3 STREET ADDRESS	1103 OGD PRIFIN ROAD	
5.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	
6.1 TITLE	TREASURER	☐ Change ☒ Addition
6.2 NAME	FERNANDO SIROIS	
6.3 STREET ADDRESS	1103 OGD PRIFIN ROAD	
6.4 CITY-ST-ZIP	DANIA, FLORIDA 33004	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 liquidator 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CLAUDE RAYMOND 2/22/95 305.925.8888

Date

Daytime Phone #