

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
May 03, 2006 08:00 A
Secretary of State

DOCUMENT # P95000063308

1. Entity Name
EL SUBMARINO SEAFOOD CORP.



Principal Place of Business
1922 WEST 60TH STREET
HIALEAH, FL 33150

Mailing Address
1922 WEST 60TH STREET
HIALEAH, FL 33012



04252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0632148

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DE LA HOZ, MIRIAN
1922 WEST 60TH STREET
HIALEAH, FL 33012

**DO NOT WRITE
IN THIS SPACE**

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000562550
05/19/06-80061-012 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME DE LA HOZ, SAMMY
STREET ADDRESS 810 N.W. 106TH STREET
CITY-ST-ZIP MIAMI, FL 33150

TITLE STD
NAME DE LA HOZ, MYRIAM
STREET ADDRESS 810 NW 106TH ST.
CITY-ST-ZIP MIAMI, FL 33150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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: *Mirian de la Hoz*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/06 305-556-7203
Date Daytime Phone #