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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000070991 (1)

RIZO AND SON SEA FOOD INC.

Mailing Address Principal Place of Business 13410 S.W. 50TH STREET 13410 S.W. 50TH STREET MIAMI FL 33175-5208 MIAMI FL 33175 3a. Date of Last Report 3. Date Incorporated or Qualified 09/14/1995 07/02/1996 4. FEt Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-0608735 Not Applicable 26 Suite, Apt #, etc \$8.75 Additional Suite, Apl. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032. Country 210 Florida Statutes Yes 🔲 No 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent RIZO, EMILIO JR 81 Name RIZZO, EMILIO JR 13410 S.W.50TH STREET 62 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33175 R3** 84 City Zio 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. S:GNATURE Signarum, tyourdion printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.5 TITLE THE RIZO. EMILIO JR 1.2 NAME MAME 13410 S.W. 50TH STREET 1.3 STREET ADDRESS STREET ADORESS **MIAMI FL 33175** 1.4 CITY - ST-ZIP CHY SI ZIE Change Addition DELETE 2.1 TITLE THEF RIZO, EMILIO SR 22 NAME MAME 13410 SW 50TH STREET 23 STREET ADDRESS STHEET ADDRESS **MIAMI FL 33175** 2 4 CITY - SY-ZIP 0017-51-791 Addition DELETE 31 TITLE THE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ACROPE SS 34 CITY-ST-ZIP CHTV - \$1 - 769 Change Addition DELETE 4.1 TITLE THE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST-7IP COTY-ST ZIP Change Addition DELETE 5.1 TITLE THILE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST ZIP Change Addition DELETE THE 6.1 TITLE 6.2 NAME MAM

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

007Y-\$1-Z-2

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 of the receipt 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 changes, or on an execute with an address.

(96/6)

FILED

Apr 23 1997 8:00am

Secretary of State