

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
Feb 04 1997 8:00am
Secretary of State

DOCUMENT # P95000087202 (4)

1. Corporation Name

SEAFOOD & LOBSTER DEPOT CORP.



Principal Place of Business

7145 W. 29 WAY
HIALEAH FL 33018

Mailing Address

P.O. BOX 3812
MIAMI BEACH FL 33140

3. Date Incorporated or Qualified

11/14/1995

3a. Date of Last Report

08/27/1996

4. FEI Number

57-2315369

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

2. Principal Place of Business

7145 W 29 Way

Suite, Apt. #, etc.

City & State

Hialeah, FL

Zip

33018

Country

Dade

2a. Mailing Address

P.O. Box 3812

Suite, Apt. #, etc.

City & State

Miami Beach FL

Zip

33140

Country

Dade

9. Name and Address of Current Registered Agent

NEGRETE, ALICE A
7145 WEST 29 WAY
HIALEAH FL 33018

81. Name

Negrete Alice

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

7145 W 29 Way

83.

84. City

Hialeah

FL

85. Zip Code

33018

10. Name and Address of New Registered Agent

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 607.0505, Florida Statutes.

SIGNATURE

Alice Negrete

Alice Negrete

1/23/97

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

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
P
NEGRETE, ALICE A
STREET ADDRESS
7145 W. 29 WAY
CITY-ST-ZIP
HIALEAH FL 33018

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P
Negrete Alice A
7145 W 29 Way
Hialeah, FL 33018

400002078514

-02/05/97--01053--016

***178.75

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 13 if changed, or on an attachment with an address.

SIGNATURE:

Alice Negrete

1/23/97 (30) 8190467

CR2E034 (9/96)