

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000002067

1. Entity Name

SUN RAY SEAFOOD, INC.

**FILED**  
**Jul 24, 2000 8:00 am**  
**Secretary of State**

07-24-2000 90014 036 \*\*\*150.00

Principal Place of Business

15223 NW 60TH AVE  
 MIAMI LAKES FL 33014  
 US

Mailing Address

P O BOX 5352  
 MIAMI LAKES FL 33014  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0668310

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KRAWITZ, SNDRA G P  
 1 LINCOLN PL  
 1900 GLADES RD STE 357  
 BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
 NAME GARZA, STEPHEN  
 STREET ADDRESS 15215 NW 60 AVE  
 CITY-ST-ZIP MIAMI LAKES FL

TITLE D ☐ Delete  
 NAME ROELANS, RON  
 STREET ADDRESS 16161 E TROOM COR  
 CITY-ST-ZIP MIAMI FL 33014

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition  
 NAME GARZA, Stephen  
 STREET ADDRESS 6150 NW 153rd St.  
 CITY-ST-ZIP Miami Lakes, FLA. 33014

TITLE D ☒ Change ☐ Addition  
 NAME ROELANS, Ronald  
 STREET ADDRESS 16161 E. TROOM Circle  
 CITY-ST-ZIP MIAMI LAKES, FLA. 33014

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other I am empowered.

SIGNATURE:

*Ronald Roelans*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-6-00

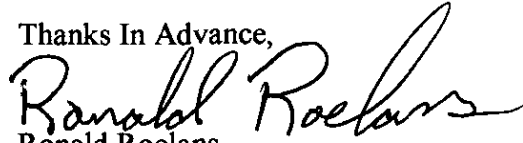
305-819-8327

Attachment  
D# 8961112067  
DU 73830

To Whom It May Concern:

This is to notify you that I did not receive my renewal notice. The first notice I received was a late fee. Please accept my \$150.00 payment as payment due since I never received the annual notice.

Thanks In Advance,

  
Ronald Roelans  
Owner