


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

FILED  
Apr 11 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northon Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P96000010050 (8)		
1. Corporation Name TOTALLY TROPICAL FISH, INC.		



Principal Place of Business  
5325 NORTH DIXIE HIGHWAY  
FT. LAUDERDALE FL 33334

Mailing Address  
5325 NORTH DIXIE HIGHWAY  
FT. LAUDERDALE FL 33334-3403

2. Principal Place of Business		2a. Mailing Address	3. Date Incorporated or Qualified 02/01/1996	3a. Date of Last Report
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 65-0637670	Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		
25. Country		10. Name and Address of New Registered Agent		

9. Name and Address of Current Registered Agent

AYLWIN, DANA  
4250 GALT OCEAN DRIVE  
FT. LAUDERDALE FL 33308

11. Name	12. Street Address (P.O. Box Number is Not Acceptable)
13. City	14. State <b>FL</b> Zip Code <b>85</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, I have 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

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

(NOTE: Registered signature required when reinstating)

DATE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	D MOORE, DAVID		
NAME	5325 NORTH DIXIE HIGHWAY		
STREET ADDRESS	FT. LAUDERDALE FL 33334		
CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE			
NAME			
STREET ADDRESS			
CITY - ST - ZIP		<input type="checkbox"/> Change	<input type="checkbox"/> Addition

CR2E034 (9/96)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Date

Daytime Phone #

0289227