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

DOCUMENT #

Total Seafood, Inc.

Principal Place of Business

SIGNATURE:

Mailino Address

FILED
May 28 1997 8:00am
Secretary of State

i iniqipari iac	00 01 23011000	3						
	NW 23rd Court	2154 NW 231	d Court					
Miami	i, Florida 33142	Miami, Flor	ida 3314	12				
					3. Date Incorporated or Qualified	3a. Date		-
		1 - 11 - 11			Feb. 2, 1996	Feb		1996
	Place of Business	2a. Mailing Address			4. FEI Number		_ 	plied For
21 Suita Ant	H ato	Suite, Apt #, etc.			65-0639913		-1	Applicable
Suite, Apt.		27		5. Certificate of Status Desired	<u> </u>	\$8.75 Additional Fee Required		
City & Stai	te	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Country		8. This corporation has liability for i			199.032,
24	25	29	30		<u> </u>	Yes 1		
	9. Name and Address of Current	Registered Agent	81 Na		10. Name and Address of New Re	gistered Age	nt	
) ai INE	ıme				
	or Moreno		82 Str	eet Addr	ess (P.O. Box Number is Not Acceptab	ile)		
	NW 23rd Court							
Miami	l, Florida 33142		83					
			84 Cit	ly	<u> </u>	— 8	5 Zip (ode
						FL °		
11. Pursuant	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statu of Florida, Such change was	ites, the above-nai authorized by the	med corp corporal	oration submits this statement for the p ion's board of directors. Thereby accer	urpose of cha at the appoint	anging its ment as	registered registered
agent. I a	am familiar with, and accept the obligat	ions of, Section 607.0505, F	lorida Statutes.	corporati	ion a board of oncolors. Thorough dollar	it the appeart	morn do	ogistores
SIGNATURE								
	Signature, typed or printed name of registered agen		TE Registerua Agent sig	nature requir		DATE	DECTOR	0.01.40
12.	OFFICERS AND	DELETE	13.	 -	ADDITIONS/CHANGES TO OFFIC		Change	Addition
TITLE	PRESIDENT		1.1 TillE			لحيا	Onarigo	LT Vocilion
NAME	Hector Moreno		1.2 NAME					
STREET ADDRESS	ZIS4 NW ZSFQ COU		1.3 STREET ADOR					
CITY-ST-ZIP	Miami, Florida 3:	3142 XXXIELETE	1.4 CITY - ST- ZIP 2.1 TITLE				Change	Addition
TITLE	VICE PRESIDENT	XXXX	2.P NAME			Ш	One igo	
NAME	Catalina Gonzale:	2	2.9 STREET ADDR	cee				
STREET ADDRESS	2154 NW 23rd Cour	rt	2.4 CITY-ST-ZIF					
CITY-ST-ZIP TITLE	Miami, Florida 33	3142 DELETE	3.1 NTLF			···	Change	Addition
NAME	· ·		3.2 NAME			-		
STREET ADDRESS			3 3 STREET ADDR	FSS				
CITY - ST - ZIP			34. CITY-ST-ZIF					
TITLE		DELE 1E	41 1/11/15				Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			43 STREET ADDR	ESS				
CITY-ST-ZIP	1		4.4 CHY-S1 - ZIP					
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5.2 NAME		40000220	1450	4	
STREET ADDRESS			5 3 STREET ADDR	ESS	40000220 -06/06/97010	94003		
CITY-ST-ZIP			54 CITY-ST-7IP		***173.75			
TITLE		DELETE	6 1 111LE				Change	Addition
NAME			6.2 NAME			7 /	$\gamma \Omega$	
STREET ADDRESS			6.3 STREET ADDR	ESS		< %	dik	
CITY-ST-ZIP			6.4 CH Y - S1 - 7.P			<u>, , , , , , , , , , , , , , , , , , , </u>	VI	
informati	eby certify that the information supplied ion indicated on this annual report or su	ipolementat annuat report is	true and accurate	and Inat	imv signature shall have the same lega	il effect as it r	d Ty that ' nade und	for path: that
l am an s	officer or director of the corporation or t	he receiver or trustee empo	wered to execute :	lhis repor	t as required by Chapter 607, Florida S	statutes; and	that my n	ame
appears	in Block 12 or Block 13 if changed, or	on an attachment with an ac	Jaress.					
SIGNAT	TURE: HTC				May 2, 19	97 (30	5) 6	33-49