## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

, PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000018067 (4)

FILED

97 SEP -8 PM 1:33

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CRUZIN CRABS SEAFOOD INC.											
	ncipal Place				Mailing Address						
	OS WOODBF				2805 WOODBRIDGE LANE						
ORLANDO FL 32808					ORLANDO FL 32808						DO NOT WRITE IN THIS SPACE
											3. Date Incorporated or Qualified 3a. Date of Last Report
											02/26/1996
2. Principal Place of Business				2	2a. Mailing Address						4 FFI Number Applied For
21	21			26	26						59-3364425 Not Applicable
	Suite, Apt. #, etc.				Suite, Apt. #, etc.						5. Certificate of Status Desired \$8.75 Additional
22				27	27						Fee Required
_	City & State			ļ	City & Stato						6. Election Campaign Financing \$5.00 May Be
23	Zip Country			28	Zip Country						Trust Fund Contribution
24	Zip				30	Personal Property Tax due June 30. Yes No					
24	9 Name and Address of Current Re						Ι			10. Name and Address of New Registered Agent	
ENGLISH, THOMAS A								81	Name	<del></del>	
2805 WOODBRIDGE LANE									0		(DO D- No-to-is No Assertable)
ORLANDO FL 32808							82	Stree	Aoare	ess (P.O. Box Number is Not Acceptable)	
CHERIDO I E OZODO							83	<u> </u>		,	
											ac 7- Codo
1								84			FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab								bove	e-namo	d corpo	oration submits this statement for the purpose of changing its registered
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 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										ion's board of directors. I hereby accept the appointment as registered	
							d Age	ent signatu	re required	ed when reinstating) DATE	
12			OFFICER	S AND DIF		00,000	13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
TITI	· .	F	F044W F		L	DELETE	1.1 ]				☐ Change ☐ Addilion
	NAME FLINT, FR			15	1.21						
	REET ADDRESS		OODBRIDGE LAI	NE					ADDRESS		
	Y-ST-ZIP	UNLAN	DO FL 32808			DELETE	2.1 T		ST-ZIP	<del></del>	7909228897-9 -09/10/9701045@-085 <sup>Addition</sup> ****165.00 ****165.00
TITE	- 1	ENGLIS	H, THOMAS A		L.	) DECEME				1	-09/10/9701/045*-005
STREET ADDRESS 2805 W		OODBRIDGE LAN	JE				2.2 NAME  2.3 STREET ADDRESS			米米米米155.88 ****155.88	
			DO FL 32808	1				2 4 City-St-ZiP		<b>'</b>	
TIT	Y-ST-ZIP	OHENN	DO 1 L 02000	<del></del>	- Т	DELETE	3.1 T		51-2IF	-	Change Addition
NA	I					- · <del>-</del>	3.2 N				- · -
	REET ADDRESS								ADDRESS		
CITY-ST-ZIP				3.4. CITY							
TIT					Γ	DELETE	4.1 T			1	Change Addition
NAI	ME :						4.21	IAME			<i></i>
1 -	REET ADDRESS						4.3 S	TREET	ADDRESS		26
CIT	Y-ST-ZIP						44 C	IY-S	ST - ZIP		9.94.1
Tit	LE					DELETE	5.1 T	ITLE			Change Addition
NAJ	ME						5.2 N	AME			
STE	REET ADDRESS						5.3 S	TREET	ADDRESS		
ÇIT	Y-ST-ZIP						5.4 C	ITY-S	S1 - 7/P		
Tet	LE				Ţ	DELETE	6.1 T	ITLE			Change Addition
NAF	ME						6.2 N	AME			
STF	REET ADDRESS						6.3 S	TREET	T ADDRESS		
CIT	Y-ST-ZIP						6.4 C	ITY-S	ST-ZIP	1	

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 of suppliemental 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 charged, or on an altabation with an address.

## Robinson Accounting

Robinson Accounting

Monday, August 04, 1997

DIVISION OF CORPORATIONS P.O. Box 6327 Tallahassee, FL 32314

Dear Sir,

This letter is to inform you that the form of the corporation, enclosed with this letter did not receive the previously mailed information. Your consideration concerning this matter is greatly appreciated.

Cordially yours,

Mr. Robinson

President