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FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000027178 (8)

1. Corporation Name

SALCLASSIC SEAFOOD, INC. ✓

Principal Place of Business

11480 S.W. 98TH STREET  
MIAMI FL 33176

Mailing Address

11480 S.W. 98TH STREET  
MIAMI FL 33176

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/27/1996

4. FEI Number

65-0657291

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 12855 SW 136 AVE

Suite, Apt. #, etc.

22 218

City & State

23 MIAMI FL

Zip

24 33186

Country

25 EE UU

2a. Mailing Address

26 12855 SW 136 AVE

Suite, Apt. #, etc.

27 218

City & State

28 MIAMI FL

Zip

29 33186

Country

30 EE UU

9. Name and Address of Current Registered Agent

GOODIER, LETICIA  
11480 S.W. 98TH STREET  
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name GOODIER LETICIA  
82 Street Address (P.O. Box Number is Not Acceptable)  
12855 SW 136 AVE Suite # 218  
83 MIAMI  
84 City FL 85 Zip Code 33186

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

*Leticia Goodier*

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME GOODIER, LETICIA  
STREET ADDRESS 11480 S.W. 98TH STREET  
CITY-ST-ZIP MIAMI FL 33176

TITLE PRESIDENT ☐ DELETE

NAME GOODIER LETICIA  
STREET ADDRESS 11480 SW 98ST  
CITY-ST-ZIP MIAMI FL 33176

TITLE CONSULTANT ☐ DELETE

NAME EDUARDO FERRER  
STREET ADDRESS 11480 SW 98ST  
CITY-ST-ZIP MIAMI FL 33176

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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:

*Leticia Goodier*

CR2E034 (10/97)