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 # P96000031955 (3)

FISHING QUEEN, INC.

FILED May 12 1997 8:00am Secretary of State



Principal Place of Business			Mailing Address				3 (80 H-00) 310 JUNIO DINA 80141 AD414 B5114 I	3 (881/68) 313 18318 DILLY ROSAL BORN BRILL BOLLED ALIDA KIDID LOLDE BEECH DEAK 1981			
2101 BRICKELL AVENUE APT. 216 MIAMI FL 33145			2101 BRICKELL AVENUE APT. 216 MIAMI FL 33129-2124								
							3. Date Incorporated or Qualified 04/08/1996	3a, Date	of Last F	Report	
2. Principal Place of Business			28. Mailing Address				4. FEI Number	Applied For			
21			26				65-0661463			ot Applicable	
Suite, Apt. #, etc.			Suite, Apt #, etc.				5. Certificate of Status Desired			Additional	
Chief State			City & State							equired	
City & State			City & State				6. Election Campaign Financing			May Be	
23 Zip	Country		28		inter-		Trust Fund Contribution	Ш		10 Fees	
24	25 29 30			Country		This corporation has liability for in Florida Statutes	intangible tax under s. 199.032, ☐ Yes ☐ No				
24	9. Name and Address	of Current Reals	stered Agent	1301	T		10. Name and Address of New Reg				
NOBREGAS, JORGE A						Name				- · · · · · · · · · · · · · · ·	
2101 BRICKELL AVENUE APT. 216 MIAMI FL 33145					82						
						Street A	Address (P.O. Box Number is Not Acceptable)				
ייי איייי	11 1 2 00 1 10				83				·		
							W 47 - July 24		-		
					84	City		FL	85 Zip	Code	
11. Pursuant to office or reagent. La	to the provisions of Section egistered agent, or both, i m familiar with, and accept	ns 607.0502 and 6 in the State of Florid of the obligations of	07.1508, Florida State da. Such change was f, Section 607.0505, F	itos, the a authorize torida Sta	bove bove d by tutes	o-named the corp	corporation submits this statement for the pu oration's board of directors. I hereby accept		nangirig i itment as	ts registered registered	
SIGNATURE	Signature, typed or printed name of	registered agent and buy	if sort cable (NC	Ili - Rogissoro	d Ane	:	required when reinstating)	DATE			
12,		ICERS AND DIREC		I 18.			ADDITIONS/CHANGES TO OFFICE		IRECTO	RS IN 12	
TITLE	D		DELETE	1.1.1	ΠtF				Change	Addition	
NAME	NOBREGAS, LESLIE	A		1.2 N	AME						
STREET ADDRESS 82230 OVERSEAS HIGHWAY				1.3 STREET ADDRESS							
CITY-ST-ZIP	ISLAMORADA FL 303	36		1.4 G	HY-S	1 - 711					
TITLE	D		☐ DELETE	2.1 T	NLE		THE SECOND PROPERTY OF SECOND PR	L	Change	Addition	
NAME	NOBREGAS, JORGE			2 2 N	AML						
STREET ADDRESS	2101 BRICKELL AVEN	NUE APT. 216		235	TREET	ADDRESS					
CITY-ST-ZIP	MIAMI FL 33145			2.40	HTY-S	37 - 7 1P		, k	•		
TITLE			☐ DELETE	311	DLE.			L.	Change	Addition	
NAME				3.2 N	AME	ĺ					
STREET ADDRESS				3 3 S	1 HE.E T	ADDRESS					
CITY-ST-ZIP			T 6/16/2	****		31 - 71P			1		
Tarê			☐ DETEAE	4 1 1				L.	Change	L Addition	
NAME				4. 2 h		:					
STREET ADORESS						ADDRESS					
CITY-ST-ZIP			D DELETE		11Y-S	1 - 7+P			Change	Notation .	
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STREET ADDRESS						ADDRESS					
CITY-ST-ZIP TITLE		<u></u>	DELFTE		HTY-S	1 · ZoP			Change	Addition	
l t			ט אונדונ ביי	6.1 1				L.	1 ouguild	L_J Addition	
NAME OTOGET ADODECC				6.2 N		ADDDCCC					
STREET ADORESS						ADDRESS					
CITY-ST-ZIP				<u> 6.4 C</u>	11Y-\$	1-710					

4. 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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 13 if changed, or on an attachment with an address.

NATURE POLICE DE MARIE DE LA TO

Males

;R2E034 (9/96)