

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. McRham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000059195 (3)

1. Corporation Name

SEACOAST SEA PRODUCTS, INC.

Principal Place of Business

C/O FEE & KOBLEGARD, P.A.
401A SOUTH INDIAN RIVER DRIVE
FORT PIERCE FL 34950

Mailing Address

C/O FEE & KOBLEGARD, P.A.
401A SOUTH INDIAN RIVER DRIVE
FORT PIERCE FL 34950

2. Principal Place of Business

21 651 Pam Lem Street
Suite, Apt. #, etc.

22

City & State

23 Sharpes, FL

Zip

24 32959

Country

25 USA

2a. Mailing Address

26 PO Box 850
651 Pam Lem Street
Suite, Apt. #, etc.

27

City & State

28 Sharpes, FL

Zip

29 32959

Country

30 USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

81

Name

ROSEMARY McGRATH

82

Street Address (P.O. Box Number is Not Acceptable)

5415 Shannon Drive

83

84

City

Fort Pierce

FL

85

Zip Code
34951

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

Rosemary McGrath

ROSEMARY McGRATH

(NOTE: Registered Agent responsible for return of documents)

9/15/97
DAY

12. OFFICERS AND DIRECTORS

TITLE PD
NAME POMASAN, RICHARD
STREET ADDRESS C/O 401A SOUTH INDIAN RIVER DRIVE
CITY-ST-ZIP FORT PIERCE FL 34950

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PD

POMASAN, RICHARD

P. O. Box 411 1 Miller Street
Highlands, NJ 07732

☒ Change ☐ Addition

☐ Change ☐ Addition

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*****550.00 *****550.00

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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

Richard Pomasan

RICHARD POMASAN

9/15/97

561-871-9100

FILED

97 DEC -1 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/15/1996

3a. Date of Last Report

4. FEI Number

190-56-2043

Applies 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

10. Name and Address of New Registered Agent

CR2E034 (4/97)