## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000064954

ABCO SHRIMP, INC.

## FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90288 034 \*\*\*150.00



Principal Place of Business  1523 HIGHLAND STREET 1524 HIGHLAND STREET 1524 HIGHLAND STREET 1525 HIGHLAND STREET 1524 HIGHLAND STREET 1525 HIGHLAND STREET 1526 HIGHLAND STREET 1527 HIGHLAND STREET 1526 HIGHLAND STREET 1527 HIGHLAND STREET 1528 HIGHLAND STREET 1			STREET ACH FL 92034 ress		DO NOT WRITE IN THIS SPACE  3. Date fr corporated or Qualifed 08/02/1996  4. FEI Number 62-1654247  5. Certificate of Status Desired  Sa.75 A diditional Fee Recuired		
City & State	28 City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Cour try	Zip <b>29</b>			This corporation owes the current year Persor al Property Tax.	Yes	□No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registere	d Agent	
				81 Name			
COOK, ELIZABETH 1523 HIGHLAND STREET				82 Street Arl	dress (P.O. Bo) Number is Not Acceptable)		
FERNANDINA BEACH FL 32034				83			
				84 City	F	85 Zip	Code
office or re agent. I as SIGNATURE	egistered agent, or bcth, in the State in familiar with, and a cept the obligation of the control of the contro	of Florida. Such change was Lons of Section 607.0505, F	authorized Iorida Stati	bove-named colling the corporates.  Agent signature requires		24/9	g"
12.		DIRECTORS	13.		ADDITI DNS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE	STD	☐ DELETE	1.1 11			[_] Criange	
NAME	COOK, ALFRED B III		1.2 NA	•			
STREET ADDRESS	1523 HIGHLAND STREET	_		REET ADDRESS			1
CITY-ST-ZIP	FERNANDINA BEACH FL 32034			TY-ST-ZIP		Change	Addition
TITLE	PD	☐ DELETE	2.1 TI			onange	
NAME	COOK, ELIZABETH P		, 2.2 N/				1
STREET ADDRESS	1523 HIGHLAND STREET	_		REET ADDRESS			
CITY-ST-ZIP	FERNANDINA BEACH FL 32034	DELETE	_	TY-ST-ZIP		☐ Change	Addition
TITLE			3 1 TI 3.2 N/			090	
NAME			1	TREET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP		DELETE	3.4. C	ITY-ST-ZIP		Change	Addition
TITLE		ے میرداد	4. 2 N	- 1		_ •	
NAME							
STREET ADDRESS				TV ST 719			
CITY-ST-ZIP		☐ DELETE	4.4 CI	TY-ST-ZIP		Change	Addition
TITLE			52 N			_ •	
NAME				REET ADDRESS			
STREET ADDRESS				TY-ST-ZIP			
CITY-ST-ZIP		☐ DELETE	6.1 T/			Change	Addition
TITLE			6.2 N/			_ ,	_
NAME				REET ADDRESS			
STREET ADDF ESS				TY-ST-ZIP			
CITY-ST-ZIP			0.4 0				

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 supplementa annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chap er 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: