SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Jul 15, 1999 8:00 am Secretary of State

07-15-1999 90006 033 ***150.00

| DOCUMENT # | P96000087937 |
|--------------------|--------------|
| 1 Corneration Name | |

SCUTTLES NEW ENGLAND SEAFOOD, INC. Principal Place of Business Mailing Address 343 W. CENTRAL AVENUE 343 W. CENTRAL AVENUE LAKE WALES FL 33853 LAKE WALES FL 33853 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/24/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 59-3406359 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 City & State City & State 6. Election Campaign Financing

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Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

\$5.00 May Be Trust Fund Contribution 8. This corporation owes the current year Intangible Personal Property.

Added to Fees V Yes ☐ No

CHARTRAND, CAROL C 343 W. CENTRAL AVENUE LAKE WALES FL 33853

25

Country

9. Name and Address of Current Registered Agent

23

24

Zip

| | 10. Name and Address of New Registered Agent | | | | | | |
|----|--|--|--|--|--|--|--|
| 81 | Name | | | | | | |
| 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| 83 | | | | | | | |
| 84 | City FI 85 Zip Code | | | | | | |

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.

Country

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| agant. 1 e | in termor man, and doopt are congenions | an, addition adviced | | | |
|----------------------------|---|----------------------|--------------------------------------|-------------------------|------------------------|
| SIGNATURE . | Signature, typed or printed name of registered agent and titl | e if applicable | NOTE: Registered Agent signature reg | uired when reinstating) | DATE |
| 12. OFFICERS AND DIRECTORS | | | 13. | 3, | |
| TITLE | D | DELETE | 1.1 TITLE | | Change Addition |
| NAME | CHARTRAND, DAVID | | 1.2 NAME | | _ · · _ |
| STREET ADDRESS | 602 BUCK MANN ROAD | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | WINTER HAVEN FL 33884 | | 1.4 CITY-ST-Z/P | | |
| TITLE | D | DELETE | 2.1 TITLE | | Change Addition |
| NAME | CHARTRAND, CAROL C | | 2.2 NAME | | • |
| STREET ADDRESS | 602 BUCK MANN ROAD | , | 2.3 STREET ADDRESS | | * * * • · · |
| CITY-ST-ZIP | WINTER HAVEN FL 33884 | | 2.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 3.1 TITLE | | Change Addition |
| NAME | | _ | 3 2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | 4.2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZiP | | |
| TITLE | | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | • | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | DELETE | 6.1 TITLE | · | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 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 requirer 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 chapged, or many attachment with an address.

CRZE034 (5/99)

7/2/99 Sir or Thadam: 588699-90006-33 P96000087937 This is the FIRST NOTICE bre received. Received on 7/1/99. on 7/2/99. She told me to send you \$150.00 with a note explaining such. Thank You. - Paral C. Chartrand, fres. Scuttles New England Seafood, Inc. 941-676-7547