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

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000072388 (6) DOCUMENT #

USA FRESH FISH & TRADING, INC.

## **FILED** Apr 20 1998 8:00am Secretary of State



1						
Principal Place of Business Mailing Address					T CONTROL TO TOTAL TODAY ORIGINATION SOUTH	
1800 NW 120TH AVE. 1800 NW 120TH AVE.						<u> </u>
PEMBROKE	PINES FL 33026	PEMBROKE PINES FL 33026				DO NOT WOITE IN THE ODAOE
•						DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
						08/18/1997
,2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				65-0776616 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22		27				Fee Required
City & Stat	е	City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		intry	,	8. This corporation owes or has paid the current year Intangible
24	25	29	30	1		Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent
	9. Name and Address of Currer	it Hegistered Agent		B1	Name	
	REAGER, DUNCAN 149 PIERCE ST.			٠.	1 valle	'
			82 Street Address (P.O. Box Number is Not Acceptable)			
, n	DLLYWOOD FL 33020			83	ļ	
				84	City	<b>■ 85</b> 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.  SIGNATURE  Signalure, typod or position name of registered agent and title if applicable. (NOTE, Registered Agent signalure required when reinstating)  DATE						
12.		D DIRECTORS	13.	o Ayo	ni signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 Ti	TLE		Change Addition
« NAME	<b>ALLOBRE, ANTHONY</b>		1.2 N	AME	ļ	
STREET ADDRESS	<b>16</b> 00 NW 120TH AVE.		1.3 S	TREET	ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33026	}	1.4 0	ITY-S	ST-ZIP	
TITLE	D	DELETE	2.1 T	TLE		Change Addition
NAME	<b>S</b> ALYERS, GARRY		2.2 N	AME	ļ	
STREET ADDRESS	1730 NW 111 TERR.		2.3 5	TREET	ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33026		2.40	AŢY-S	ST-ZIP	
TITLE		☐ DELET <b>E</b>	3.1 T	TLE		Change Addition
NAME			3.2 N	AME		
STREET ADDRESS			3.3 S	TREET	ADDRESS	
CITY-ST-ZIP			3.4.0	ITY-S	ST - ZIP	
TITLE		DELETE	4.1 1	TLE		☐ Change ☐ Addition
NAME			4.2 N	IAME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.4 C	ITY-S	IT-ZIP	
TITLE	I I		5.1 TI	TLE		☐ Change ☐ Addition
NAME			5.2 N	AME		
STREET ADDRESS			5.3 \$	TREET	ADDRESS	
CITY-ST-ZIP		<b>70.</b> 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.			11-ZIP	
TITLE		DELETE	6.1 TI	TLE		☐ Change ☐ Addition
NAME			6.2 N	AME		
STREET ADDRESS			6.3 S	TREET	ADDRESS	
CITY-ST-ZIP			6.4 C	ITY-S	IF-ZIP	

14. Thereby 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 suppliemental 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.

4-14-98

435-6905