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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000024124

1. Corporation Name

## **FILED** Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90044 046 \*\*\*150.00

G.A. SEA	AFOOD GROUP, INC.						
G., (, C.)				1 (8 6) (8 8) (1.6 1)	1 (8(3) <b>88</b> 31 <b>88</b> 113 <b>88</b> 13 <b>88</b> 11		11 <b>1</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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					NOT WRITE IN THI	S SPACE	
				3. Date Incorporated	or Qualifed		}
• • • • • • • • • • • • • • • • • • • •		2a. Mailing Address		03/13/1998 4. FEI Number		· · · · · · · · · · · · · · · · · · ·	plied For
· ·	lace of Business	<u>⊢¬</u> -		45-08	2.0488	ļ <del>.   ```</del>	t Applicable
Suite, Apt.	# ptc	Suite, Apt. #, etc.	<u> </u>	<u> </u>	-	\$8.75 A	
22	<del>n</del> , etc.	27		5. Certifcate of Status	Desired 🔲	Fee Re	I
City & State	Α	City & State		6. Election Campaign	Financing	\$5.00	May Re
23	-	28		Trust Fund Contribe	- 1	Added to	
Zip	Country	Zip	Country	8. This corporation ov	ves the current year li	ntangible	
24	25	29	30	Personal Property	Гах.	Yes	□No
	9. Name and Address of	Current Registered Agent		10. Name and Addres	s of New Registered	d Agent	
			81 Name	•		•	
	NADOS, GLORIA		82 Street	Address (P.O. Box Number is I	Not Acceptable)		
9510 SW 6TH COURT							
PEM	BROKE PINES FL 33025		83	·			
			84 City			85 Zip C	Code
					FI	<u> </u>	
11. Pursuant	to the provisions of Sections	607.0502 and 607.1508, Florida Statute	s, the above-named	corporation submits this staten	nent for the purpose o	or changing its nintment as rec	registered
office or re	enistered agent or both in th	607.0502 and 607.1508, Florida Statute le State of Florida. Such change was au le obligations of, Section 607.0505, Flori	ithorized by the com	corporation submits this statem oration's board of directors. I h	nent for the purpose of ereby accept the app	ointment as rec	registered gistered
office or re agent. I as SIGNATURE	egistered agent, or both, in th m familiar with, and accept th	ne State of Florida. Such change was au ne obligations of, Section 607.0505, Flori	ithorized by the corp ida Statutes.	oration's board of directors. I h	eiebh accehr me abb	or changing its ointment as rec	registered gistered
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office or reagent. I as SIGNATURE  12. TITLE NAME	egistered agent, or both, in the familiar with, and accept the Signature, typed or printed name of region of PD GRANADOS, GLORIA	te State of Florida. Such change was au le obligations of, Section 607.0505, Flori  stered agent and title if applicable. (NOTE.  ERS AND DIRECTORS	Registered Agent signature  13. 1.1 TITLE 1.2 NAME	required when reinstating)  ADDITIONS/CHANG	DATE	ND DIRECTO	RS IN 12
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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 suppliemental amount 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 trusted 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 attackment with an address, with all other like empowered.

Gloria Granalos