FILED

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90214 016 ***150.00

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 # P98000041451

1. Corporation Name

THE LOBSTER TRAP, INC.

1							
Principal Place of Business Mailing Address					F INDECEMBER THE SECOND COURT MARKET WASHING AGUAL	m1m81 (184) A	1661 Allet 1181 1881
4 N. FEDERAL HWY. 4 N. FEDERAL HWY.					,		
DANIA FL 33004 DANIA FL 33004					DO NOT WOLFE IN THE	CDACE	
					DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed	SPACE	
					05/07/1998		}
2 Principal P	Place of Business	2a. Mailing Address			4. FE! Number		Applied For
21	lase of Basilloss	26			65-0F37653	-	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.7	5 Additional
22		27			5. Certificate of Status Desired	Fee	Required
City & Stat	te	City & State			6. Election Campaign Financing		0 May Be
23		28			Trust Fund Contribution	Adde	ed to Fees
Žip	Country	Zip	_ Counti	у	8. This corporation owes the current year Int		
24	25	29 3	0		Personal Property Tax.	Yes	□No
	9. Name and Address of Currer	nt Registered Agent	8	1 Name	10. Name and Address of New Registered	Agent	
MAG	GGI, JOSEPH L		Ľ				
4 N. FEDERAL HWY.			8	2 Street Addr	ress (P.O. Box Number is Not Acceptable)		
DANIA FL 33004			8	3			·
[8	4 City	FL	85 Z	ip Code
			,		oration submits this statement for the purpose of		to registered
ì office or i	registered agent, or both, in the State am familiar with, and accept the obligation Signature, typed or printed name of registered ege	of Florida. Such change was auto ations of, Section 607.0505, Florid	horized b la Statute	y the corporation	on's board of directors. I hereby accept the appointment of the control of the co	Intment as	registered
office or i agent. I a	registered agent, or both, in the State am familiar with, and accept the obliga Signature, typed or printed name of registered age OFFICERS AN	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	horized by la Statute segistered Ag	y the corporations.	on's board of directors. I hereby accept the appoi	ND DIREC	TORS IN 12
office or I agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obligation of the state	of Florida. Such change was auti- ations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R	horized by la Statute segistered Age 13.	y the corporations.	on's board of directors. I hereby accept the appointment of the control of the co	Intment as	TORS IN 12
office or I agent. I a SIGNATURE 12. TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of registered age OFFICERS AND MAGGI, JOSEPH L	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	horized by la Statute statute legistered Ag 13. 1.1 TITLE 1.2 NAME	ent signature require	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12
office or I agent. I a SIGNATURE 12.	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	horized by the Statute statute and statute	y the corporations. ent signature require	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	signature, typed or printed name of registered age OFFICERS AN MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	egistered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY-	y the corporations. ent signature require ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of registered age OFFICERS AND MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004 PVST	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	egistered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE	y the corporations. ent signature require ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	egistered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	y the corporations. ent signature require ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of th	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	egislered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the obligation	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egislered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STREI 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY-	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of th	of Florida. Such change was autiations of, Section 607.0505, Florid ont and title if applicable. (NOTE: R ND DIRECTORS	egistered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.3 STRE 2.4 CITY 3.1.TITLE	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.4 CITY 3.1 TITLE 3.2 NAME	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STRE	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 pe Addition
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.4 CITY 3.1 TITLE 3.2 NAME	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC	TORS IN 12 De Addition De Addition De Addition
office or I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of the state of the obligation of	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ap 13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC Chang	TORS IN 12 De Addition De Addition De Addition
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of Fricers And OFFICERS AND MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004 PVST MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.4 CITY 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC Chang	TORS IN 12 De Addition De Addition De Addition
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	registered agent, or both, in the State am familiar with, and accept the obligation of Fricers And OFFICERS AND MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004 PVST MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY 2.1 TITLE 2.2 NAME 2.4 CITY 3.1 TITLE 3.2 NAME 3.4 CITY 4.1 TITLE 4.2 NAME	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS et ADDRESS .ST-ZIP ET ADDRESS .ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC Chang	TORS IN 12 De Addition De Addition De Addition
office of I agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	registered agent, or both, in the State am familiar with, and accept the obligation of Fricers And OFFICERS AND MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004 PVST MAGGI, JOSEPH L 4 N. FEDERAL HWY. DANIA FL 33004	of Florida. Such change was autitions of, Section 607.0505, Florid ont and title if applicable. (NOTE: RND DIRECTORS DELETE	egistered Ag 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.4 CITY- 3.1 TITLE 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STRE	y the corporations. ent signature require ET ADDRESS ST-ZIP ET ADDRESS est ADDRESS est ADDRESS est ADDRESS est ADDRESS st-ZIP E ET ADDRESS ST-ZIP	on's board of directors. I hereby accept the appointment of the control of the co	ND DIREC Chang	TORS IN 12 De Addition De Addition De Addition

CITY-\$T-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 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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ DELETE

☐ Change

Addition