## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)** P98000072150 **DOCUMENT#** 1. Entity Name



## **FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91470 037 \*\*\*150.00

ATLANTIC FISH & SEAFOOD MARKET, INC.								
Principal Place of Business 2106 NE 123RD ST. N MIAMI FL 33181		Mailing Address 2106 NE 123RD ST. N MIAMI FL 33181				 		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 65-0858356	<u> </u>	oplied For ot Applicable	
Zip Country		Zip	Country		5. Certificate of Status Desired	\$8.75 Add Fee Require		
	6. Name and Address of Curre	nt Registered Agent	ء حقہ		-7Name and Address of New Registere	l Agent=		
CORPCO, INC.				Name Street Address (P.O. Box Number is Not Acceptable)				
2699 SOUTH BAYSHORE DR., 7TH FL MIAMI FL 33131								
	•		T	City	F	Zip Code	e	
the obligat	named entity submits this statement ions of registered agent.			office or registers	ed agent, or both, in the State of Florida. I an		and accept	
. F After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 r Payable to Florida Department	0 .			9. Election Campaign Financing  —Trust Fund Contribution.	\$5.0 Added	May Be to Fees	
10.		D DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD DILJOHN, ANDY 2106 NE 123RD ST. N MIAMI FL 33181	☐ Delete	TITLE NAME STREET CITY-ST	ADDRESS T-ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET CITY-ST	ADDRESS 1-zip		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET CITY-ST	ADDRESS T-ZIP		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET	ADDRESS 1- ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET / CITY-ST	ADDRESS   1- ZIP		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET /	ADDRESS 1-ZIP		Change	Addition	

12. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: