## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

## **FILED** DOCUMENT # P98000078230 May 15, 2000 8:00 am Secretary of State CRAB HUT SEAFOOD INC. 05-15-2000 90243 048 \*\*\*150.00 Principal Place of Business Mailing Address 837 8 AVE WEST 837 8 AVE WEST PALMETTO FL 34221 PALMETTO FL 34221-4709 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0878626 Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BLOOM, JUSTIN Street Address (P.O. Box Number is Not Acceptable) 1910 MANATEE AVE W **BRADENTON FL 34205** Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable, FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change TITLE ☐ Delete TITLE SMALLS, HENRY SR NAME STREET ADDRESS 804 27TH AVE W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34205** Delete ☐ Addition TITLE Change TITLE SMALLS, BERNETT NAME NAME 804 27TH AVE W STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34205** CITY-ST-ZIP Addition Change TITLE ☐ Delete TITLE ADAMS, BRIDGETT NAME NAME STREET ADDRESS 813 18TH ST E STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34205** CITY-ST-ZIP Change Addition Delete TITLE TITLE MCKENZIE, ALETHA NAME NAME 3311 NORTH US 41 BLVD. WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALMETTO FL 34221 ☐ Change ☐ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 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 11 or Block 12 if