2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

P98000086227

1. Entity Name

FLORIDA'S FINEST SEAFOOD COMPANY





FILED

Sep 18, 2003 8:00 am Secretary of State

09-18-2003 90030 045 ***150.00

Principal Place of Business Mailing Address 3628 NW 16TH ST 3628 NW 16TH ST LAUDERHILL FL 33311 LAUDERHILL FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0869692 Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -6.-Name and Address of Current Registered Agent-7.=Name and Address of New Registered Agent-GRANET, LLOYD ESQ. Street Address (P.O. Box Number is Not Acceptable) 1900 NW CORPORATE BLVD. SUITE 100, WEST BUILDING **BOCA RATON FL 33431** Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Addition JAFFY, TODD NAME NAME STREET ADDRESS 3628 NW 16TH ST STREET ADDRESS CITY-ST-7IP LAUDERHILL FL 33311 CITY-ST-7IP ☐ Addition TITLE ☐ Delete TITLE Change JAFFY, GREGG NAME STREET ADDRESS 3628 NW 16TH ST STREET ADDRESS CITY-ST-ZIP LAUDERHILL FL 33311 CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Delete TITL S Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TIT! F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME

I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with a made address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP



80149003

To Whon it may Concern,

This letter is to inform you that this Uniform business report was the first copy that I have received in my office. I have enclosed the \$150.7% fee that I had paid in the past: Please feel free to call me at any time. (954) 585-8100.

Thank you,

Gregg Jaffy Vice Provident