

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000087923

1. Entity Name

CARIBBEAN FISH MARKET INC.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90032 007 ***150.00

Principal Place of Business

19503 NW 2ND AVE.
 N. MIAMI FL 33169-3335

Mailing Address

19503 NW 2ND AVE.
 N. MIAMI FL 33169-3335

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0877049

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAMNATH, SUE
 19503 NW 2ND AVE.
 N. MIAMI FL 33169-3335

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
 NAME RAMINATH, SUE
 STREET ADDRESS 19503 N.W. 2ND AVE
 CITY-ST-ZIP N MIAMI FL 33169

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VP ☐ Delete
 NAME SIMBSY, RAMINATA
 STREET ADDRESS 3904 JAMINE AVE
 CITY-ST-ZIP N MIAMI FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/15/00 954 722 7138

CR2F034 (5/00)

August 14th, 2000
attachment
P98000087923
A0079194

To whom it may concern,

This is to notify you that I
Sue Ramnath, president of Caribbean
Fish Market, did not receive a
2000 Uniform Business Report Form
prior to receiving a second notice.

I am however filing this one
within the time limit.

Your Cooperation is greatly appreciated

Thank you

Sue Ramnath

SUBHADR A RAMNATH

State of FL County of BROWARD
Signed before me on this 15TH day
of Aug, 2000 by _____

Notary Public

Alfred H. Bernard
ALFRED H. BERNARD
COMMISSION # CC 646515
EXPIRES JUN 7, 2001
BONDED THRU
ATLANTIC BONDING CO., INC.