PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am **Secretary of State**

03-01-1999 90018 023 ***150.00

DOCUMENT # P98000097161 1. Corporation Name BRENGOLD FISHERY, INC. Principal Place of Business Mailing Address 4250 CONGREVE PLACE 4250 CONGREVE PLACE-SARASOTA FL 34241 SARASOTA FL 34241 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/16/1998 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 65-0874010 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П Added to Fees Trust Fund Contribution 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible Personal Property Tax. □No 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 GOLDEN, JACK L 82 Street Address (P.O. Box Number is Not Acceptable) **4250 CONGREVE PLACE** SARASOTA FL 34241 83 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition PRESIDENT Change DELETE 1.1 TITLE TITLE GOLDEN, JACK L 1.2 NAME NAME **4250 CONGREVE PLACE** STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34241 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE TITLE 2.1 TITLE GOLDEN ERIKA NAME 2.2 NAME 4250 CONEREVE PL. STREET ADDRESS 2.3 STREET ADDRESS SACASOTA, FL. 3424/ 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE TITLE 31 TITLE MAHEW BRENNAN NAME 3.2 NAME 568 Coquette PR. STREET ADDRESS 3.3 STREET ADDRESS LARGO FL. 3377/ 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ___ Addition DELETE Change 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CJTY-ST-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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change address, with all other like empowered.

SIGNATURE

CITY-ST-ZIP

CR2E034 (11/98)