FILE, NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000097897

Country

9. Name and Address of Current Registered Agent

25

WOLCIECHOSKI, MARIA B

MIAMI FL 33155

7235 CORAL WAY, SUITE 201

Corporation Name

THE SEAFOOD PLACE, INC.

Principal Pl	ace of	Business
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Mailing Address

7235 CORAL WAY, SUITE 201 MIAM! FL 33155

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

7235 CORAL WAY, SUITE 201

MIAMI FL 33155

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

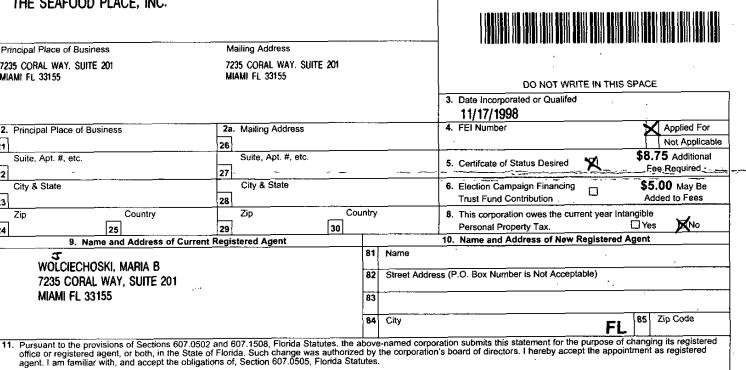
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FILED Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90056 032 ***158.75



SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ Addition DELETE 117me TITLE DPS WOJCIECHOWSKI, MARIA B 1.2 NAME NAME 7235 CORAL WAY, STE. 201 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33155** CITY-ST-ZIP 1.4 CITY-ST-ZIP Change ☐ Addition DELETE 2.1 TITLE TITLE WOJCIECHOWSKI, CRISTIAN A 22 NAME NAME 7235 CORAL WAY, SUITE 201 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33155 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIF 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 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS

Country

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City

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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 received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

64 CITY-ST-ZIP

STREET ADDRESS

TREASURER

MARIA B. Wojelechowski

CR2E034 (11/98)