

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000105223**

1. Corporation Name

MAINE WAY SEAFOOD, INC.

Principal Place of Business

4227 BEE RIDGE RD.
SARASOTA FL 34233

Mailing Address

4227 BEE RIDGE RD.
SARASOTA FL 34233

FILED
Aug 17, 1999 8:00 am
Secretary of State

08-17-1999 90011 008 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/17/1998

4. FEI Number

65-0883049

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

34233

30

Sarasota

9. Name and Address of Current Registered Agent

PREWETT, DANIEL L
5777 BENEVA RD. SO.
SARASOTA FL 34233

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☒ DELETE
NAME **PORTER, RICK**
STREET ADDRESS **4227 BEE RIDGE RD.**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE **D** ☒ DELETE
NAME **SAWYER, JOHN**
STREET ADDRESS **4227 BEE RIDGE RD.**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE **D** ☒ DELETE
NAME **SAWYER, DULCIE**
STREET ADDRESS **4227 BEE RIDGE RD.**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE **D/S** ☐ DELETE
NAME **SOULES, REGINA**
STREET ADDRESS **4227 BEE RIDGE RD.**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DANIEL PREWETT D/TAG** ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS **5777 Beneva Rd.**
1.4 CITY-ST-ZIP **Sarasota FL 34233**

2.1 TITLE **Melvin Prince Pres** ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS **5775 Beneva Rd**
2.4 CITY-ST-ZIP **Sarasota FL 34233**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE **Sec 12.** ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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 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.

SIGNATURE:

Melvin Prince
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

P98000105223

4227 Bee Ridge Road
Suite A
Sarasota, FL 34233

605752 90014-8
606725-90011-8

Maine Way Seafood, Inc.



June 24, 1999

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Request for waiver of penalty for late filing.

Document # P98000105223

Dear Sir or Madam:

We recently became aware that our Profit Corporation Annual Report was not filed timely. We discovered this information when our neighbor brought over mail he collected for us but mislaid in his office until last week. His address is 4227 Bee Ridge Road. Our address is 4227 Bee Ridge Road "Suite A". We have corrected this information on our Corporate Annual Report, that we are sending this week, so this situation will not happen again.

We do realize that a Annual Report must be filed every year and that the fee is \$150, but we did not realize that the due date before penalty is May 1st until we received the "1st NOTICE". We were waiting on the state to notify us about filing, not knowing that our form was next door at our neighbor's dry cleaning store.

Maine Way Seafood is our first Florida corporation and we are trying our level best to make a go at it. We seem to be making every beginner's mistake possible trying to get our little seafood store off and running. We have recently hired an accountant to help us file forms, sales tax, payroll, etc., so hopefully we will not get caught unaware again.

We are requesting a waiver of the late filing penalty, \$400 dollars is a great deal of money to our corporation at this time. We hope to grow and be a great asset to Sarasota and the State of Florida someday, but right now we are struggling and need every dollar that comes in. Hopefully, you will agree with us that we had reasonable cause for filing late and you will waive the penalty. Some help now from the State would be greatly appreciated.

Sincerely,

Regina E. Soules
President



P98000105223
~~605752-90014-8~~
606725-90011-8

Thank you
so much for
not changing the
\$400.00 - we
really appreciate
it!!