2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900005656 1. Entity Name MIAMI RIVER FISH MARKET, INC.						Secretary of State 02-13-2002 90237 005 ***158.75					
Principal Plac 400 NW N RIV MIAMI FL 331		Mailing Address 400 NW N RIVER DRIVE MIAMI FL 33128				1 (1)	(1 10: 11 0 10:10 12:11: 00:11	i 20 111 30 111 00	111 88: 87 87:1 8 8 1/81 7	1716 0 - 0175 J ob k	
2. Principal F	Place of Business	3. Mailing Address									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & Stat	e	City & State				4. FEI Number 65-0890567 Applied For Not Applicable					
Zip Country		Zip Count		try		5. Certificate of Status		d X	\$8.75 Add	litional	
6. Name and Address of Current Registered Agent GLUCK, ROBERT E 300 N.W. 70 AVE., STE. 200 PLANTATION FL 33317				Street Add	7. Name and Address of New Registered Agent NameSAN 6, EDDY 0. Street Address (P.O. Box Number is Not Acceptable) HOO NW N. River DR City Miam, FL ZigCgig 28						
9. This corporate filing	signature, typed or printed name of registered alent a coration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	inclute if applicable. (NOTE	Registere	d Agent signature IS \$150.00 will be \$55	egistered e required w 0 0.00	then reinstating)		DAT	7-02 - \$5.0		
11.	OFFICERS AND	DIRECTORS	12.	<u>-</u>			S/CHANGES TO	OFFICERS A	ND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SANG, EDDY O 400 NW N RIVER DRIVE								☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	55660 N								☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS		☐ Delete		ET ADDRESS		<u></u>			☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAMI STRE						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	portify that the information supplied with	□ Delete	NAMI STRE CITY	E ET ADDRESS -ST-ZIP		i 410 07(N/A Flect I. O	16	Change	Addition	

Increase 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.