

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90093 045 ***150.00

DOCUMENT # P99000025918

1. Entity Name
CORAL FISH, INC.

Principal Place of Business

**8801 FONTAINEBLEAU BLVD.
 APT. 310
 MIAMI FL 33172**

Mailing Address

**8801 FONTAINEBLEAU BLVD.
 APT. 310
 MIAMI FL 33172**

2. Principal Place of Business

2588 SW 27th Ave.

3. Mailing Address

2588 SW 27th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-0909714

Applied For

Not Applicable

Zip

33133

Country

Zip

33133

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZEA, HUMBERTO

**8801 FONTAINEBLEAU BLVD. → Address changed →
 APT. 310
 MIAMI FL 33172**

7. Name and Address of New Registered Agent

Name

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

2588 SW 27th Ave.

City

MIAMI

FL

Zip Code

33133

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 \$150.00

After May 1, 2002 Fee will be \$550.00

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

TITLE **PSD** ☐ Delete
 NAME **ZEA, HUMBERTO**
 STREET ADDRESS **8801 FONTAINEBLEAU BLVD., APT. 310**
 CITY-ST-ZIP **MIAMI FL 33172**

TITLE **VP** ☐ Delete
 NAME **TORRES, LUZ MARJORIE**
 STREET ADDRESS **8801 FONTAINEBLEAU BLVD., APT. 310**
 CITY-ST-ZIP **MIAMI FL 33172**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **2588 SW 27th Ave.**
 CITY-ST-ZIP **MIAMI, FL 33133**

TITLE ☒ Change ☐ Addition
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 STREET ADDRESS **2588 SW 27th Ave.**
 CITY-ST-ZIP **MIAMI, FL 33133**

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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 a power like empowered.

SIGNATURE:

Signature Required
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/02

CR2E034 (9/01)