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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

PACIFIC OCEAN SEAFOOD IMPORTERS AND EXPORTERS, I NC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			t i deriolo ilo figil dalli oribi l'ibio ilbi dirai origit bibit dibit dibit ilbi		
7304 NW 34		7304 NW 34 ST						
Miami Fl. 3 Us	3122	MIAMI FL 33122				DO NOT WRITE IN THIS SE	DACE.	
03		US				3. Date Incorporated or Qualified	ACE	
						12/19/1990		
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number	Applied For	
21		26				65-0285294	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22		27				5. Certificate of Status Desired	Fee Required	
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be		
23						Trust Fund Contribution	Added to Fees	
Zip	-	Zip	Country			8. This corporation owes or has paid the curre	· ·	
24	25 Name and Address of Current	29 Registered Agent	30]			Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent		
C	ORINO, PEDRO A.			81	Name	10. Namo ana Adoloso of four flogisterios A	Jone	
407 LINCOLN RD								
	TE 2B		82 Street A		Street Ac	Idress (P.O. Box Number is Not Acceptable)		
	IAMI BEACH FL 33139			83			·	
141	PAN DEACHTE 33133			Ш				
				84	City	FL	85 Zip Code	
11. Pursuant t	o the provisions of Sections 607 0502	and 607.1508, Florida Statul	tes, the a	pove	named co	progration submits this statement for the purpose of c	hanging its registered	
office or re	e giste red agent, or both, in the State c	of Florida. Such change was i	authorizo	od bv	the corpo	ration's board of directors. I hereby accept the appoi	ntment as registered	
agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature typied or presed range of registered agreal and title diapplicable (NOTE Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND I		
TITLE	Р	[_] DELETE	LETE 1.1 TITL				Change Addition	
NAME	1 = 1 :: = = 1 :: = = 1 :: = = 1 :: =		1.2 N	IAME	İ		12	
STREET ADDRESS			THEE1 A	ODRESS				
CITY-ST-ZIP			ITY-SI	- ZIP				
TITLE	VP □ DELETE 211				L	_ Change		
NAME	ALVAREZ, JACQUELINE		2 2 NAME					
STREET ADDRESS	7304 NW 34TH STREET		2.3 STREET ADDRES		DDRESS			
CITY-ST-ZIP	MIAMI FL	Driete		ITY-ST	- ZIP		100	
TITLE		[] DELETE	3.1 T			L	☐ Change ☐ Addition	
NAME STREET ADDRESS			3.2 N		Poores			
CITY-ST-ZIP					DDRESS			
TITLE		DELETE	4.1 T	CITY-ST	- 2114		Change Addition	
NAME			4.21			_	munion	
STREET ADDRESS					DORESS			
CITY-ST-ZIP				ITY-ST	i		,	
TITLE		DELETE		5.1 TITLE		7	Change Addition	
NAME			52 N			11	<i>,</i> //	
STREET ADDRESS					DDRESS	/	4/1/2	
CITY-ST-ZIP			54C	IIY-\$1-	ZIP	7/)	1106	
TITLE		DELETE	611		.	80000250446	hange Addition	
NAME			6.2 N	AME .	· [80000250/446 -04/29/9801013003	·	
STREET ADDRESS					DDRESS	***150.00		
CITY-ST-ZIP			64C	(TY-\$1-	ZIP			
44 Lhorobu ca	artifu that the information consilied will	to their fillings of concession of a second				in Continue 440 07(0)(i) Florida Ctatutas 14 other and		

not-family for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information for and accurate and that my signature shall have the same legal effect as if made under oath; that I am an powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this armual report or supplemental armual re-officer or director of the corporation or the receiver or trus Block 12 or Block 13 if changed, or on an attach and wall