

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
3000 BOULEVARD
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

MAY 10 11:10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S59983**

(4)

JOSEPH'S SEAFOOD RESTAURANT, INC.

21772 LITTLE BEAR WAY
BOCA RATON FL 33428

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3. Date of Appointment or Qualification
06/13/1991

3a. Date of Last Report
03/18/1994

4. FIC Number
59-0270734

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. Does corporation have liability for intangible tax under 19-0001?
Corporate Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GLAZER, SANDRA
21772 LITTLE BEAR WAY
BOCA RATON FL 33428

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

85. Zip Code

11. Pursuant to the provisions of law in effect on the date of filing of this statement, the undersigned corporation certifies the statement for the purpose of changing its registered office or registered agent, and certifies that the filer of this statement is authorized to execute this statement and to bind the corporation in all matters relating to the execution of this statement, and hereby accepts the appointment as registered agent.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY	STATE	ZIP
PTD GLAZER, JOSEPH PATRICK	21712 LITTLE BEAR WAY	BOCA RATON	FL	
VSD GLAZER, SANDRA LYNN	21712 LITTLE BEAR WAY	BOCA RATON	FL	
NAME				
STREET ADDRESS				
CITY				
STATE				
ZIP				
NAME				
STREET ADDRESS				
CITY				
STATE				
ZIP				
NAME				
STREET ADDRESS				
CITY				
STATE				
ZIP				

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY	STATE	ZIP	Change	Addition
NAME					☐	☐
STREET ADDRESS					☐	☐
CITY					☐	☐
STATE					☐	☐
ZIP					☐	☐
NAME					☐	☐
STREET ADDRESS					☐	☐
CITY					☐	☐
STATE					☐	☐
ZIP					☐	☐
NAME					☐	☐
STREET ADDRESS					☐	☐
CITY					☐	☐
STATE					☐	☐
ZIP					☐	☐

14. I, the undersigned, certify that the information supplied with this report is complete, true and correct, and that the undersigned is authorized to execute this statement and to bind the corporation in all matters relating to the execution of this statement, and hereby accepts the appointment as registered agent.

SIGNATURE: *Sandra Lynn Glazer*
SIGNATURE AND PRINTED NAME OF AUTHORIZED OFFICER OR DIRECTOR

3/04/95 407-4871873