

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S87797

(4)

1. Corporation Name

CJ'S SEAFOOD COMPANY, INC.

Principal Place of Business

100 WEST LIVINGSTON STREET
ORLANDO FL 32801

Mailing Address

100 WEST LIVINGSTON STREET
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/17/1991

3a. Date of Last Report
05/01/1994

4. FBI Number
59-3088225

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. Suite, Apt. # etc.

23. City & State

24. Zip

25. Country

2a. Mailing Address

26. Suite, Apt. # etc.

27. City & State

28. Zip

30. Country

9. Name and Address of Current Registered Agent

HARMENING, W.A. II
100 W. LIVINGSTON STREET
ORLANDO FL 32801

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 607.010(7) and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in 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 607.010(7), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent

Signature of Registered Agent or Registered Agent

Signature

12. OFFICERS AND DIRECTORS

NAME
HARMENING, W. A. I
STREET ADDRESS
100 W. LIVINGSTON STREET
CITY, STATE, ZIP
ORLANDO FL

NAME
LOCKE, JOHN
STREET ADDRESS
100 W. LIVINGSTON STREET
CITY, STATE, ZIP
ORLANDO FL

NAME
STINE, ROBERT H
STREET ADDRESS
100 WEST LIVINGSTON STREET
CITY, STATE, ZIP
ORLANDO 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 IN 12

1. NAME ☐ Change ☐ Addition

2. NAME ☐ Change ☐ Addition

3. STREET ADDRESS ☐ Change ☐ Addition

4. CITY, STATE, ZIP ☐ Change ☐ Addition

5. NAME ☐ Change ☐ Addition

6. NAME ☐ Change ☐ Addition

7. STREET ADDRESS ☐ Change ☐ Addition

8. CITY, STATE, ZIP ☐ Change ☐ Addition

9. NAME ☐ Change ☐ Addition

10. NAME ☐ Change ☐ Addition

11. STREET ADDRESS ☐ Change ☐ Addition

12. CITY, STATE, ZIP ☐ Change ☐ Addition

13. NAME ☐ Change ☐ Addition

14. NAME ☐ Change ☐ Addition

15. STREET ADDRESS ☐ Change ☐ Addition

16. CITY, STATE, ZIP ☐ Change ☐ Addition

17. NAME ☐ Change ☐ Addition

18. NAME ☐ Change ☐ Addition

19. STREET ADDRESS ☐ Change ☐ Addition

20. CITY, STATE, ZIP ☐ Change ☐ Addition

21. NAME ☐ Change ☐ Addition

22. NAME ☐ Change ☐ Addition

23. STREET ADDRESS ☐ Change ☐ Addition

24. CITY, STATE, ZIP ☐ Change ☐ Addition

25. NAME ☐ Change ☐ Addition

26. NAME ☐ Change ☐ Addition

27. STREET ADDRESS ☐ Change ☐ Addition

28. CITY, STATE, ZIP ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. Further, I certify that the information included 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. I am an officer or director of the corporation or the registered or beneficial owner of the report as required by Chapter 607, Florida Statutes, and that my duties appear in Block 12 of Block 13 of this filing. I am an individual with an address.

SIGNATURE:

W.A. Harmening
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95

407-843-5715