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

PROFIT: CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **S94915**

Country

25

MILLER, ROBERT K. 2975 OVERSEAS HIGHWAY MARATHON FL 33050

1. Corporation Name

T & W SEAFOOD, INC.

Principal F	lace of	Business
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2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

24

Zip

Mailing Address

2a. Mailing Address

City & State

Suite, Apt, #, etc.

26

27

28

29

1258 OCEANVIEW AVENUE MARATHON FL 33050

1258 OCEANVIEW AVENUE MARATHON FL 33050

## May 27, 1999 8:00 am Secretary of State

05-27-1999 90011 033 \*\*\*550.00



DO NOT WRITE IN TH	IIS SPACE
3. Date Incorporated or Qualifed 11/18/1991	
4. FEI Number	Applied For
65-0283468	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 owes the current year Intangible

125)	29	(30)		_	Personal P	roperty rax.		LJ řes		
9. Name and Address of	Current Registered Agen	t			10. Name and	Address of New I	Registered A	gent	,	
R, ROBERT K. DVERSEAS HIGHWAY			81	Name						
			82	Street Addre	ss (P.O. Box Nu	mber is Not Accepta	able)			
THON FL 33050		83								
			84	City			FL	85 2	Zip Code	

			r <u>.                                    </u>			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or 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 607.0505, Florida Statutes.						
SIGNATURE	AOT.	Daniel d Sandalanakas as	cured when reinstahno) DATE	. \		
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE OFFICERS AND DIRECTORS	Registered Agent signature red	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2		
т	D DELETE	1.1 TITLE	Change ☐ Ad			
TITLE	<del>-</del>					
NAME	CHAO, RAYMOND	1.2 NAME				
STREET ADDRESS	801 KEARNEY ST.	13 STREET ADDRESS				
CITY-ST-ZIP	SAN FRANCISCO CA	1.4 CITY-ST-ZIP	☐ Change ☐ Ad	lalisia a		
TITLE	D DELETE	2.1 TITLE	☐ Change ☐ Ad	.OiliOn		
NAME	CHAO, JANE	2.2 NAME		-		
STREET ADDRESS	801 KEARNEY ST.	2.3 STREET ADDRESS				
CITY-ST-ZIP	SAN FRANCISCO CA	2.4 CITY-ST-ZIP				
TITLE	DELETE	3.1 TITLE	☐ Change ☐ Ad	dition		
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS		:		
CITY-ST-ZIP		3.4, CITY-ST-ZIP				
TITLE	☐ DELETE	4.1 TITLE	Change Ad	idition		
NAME		4, 2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CITY-ST-ZIP				
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Ad	dition		
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP		5.4 CITY-ST-ZIP				
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Ad	Idition		
NAME	.* /	6.2 NAME				
STREET ADDRESS		63 STREET ADDRESS				
CITY-ST-ZIP .		6.4 CITY-ST-ZIP				

Country

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 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; 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 12 or Block 13 if changed, or on an appachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR