## 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 # V27823 1. Corporation Name

SEA BREEZE SEAFOOD, INC.

Principal Place	of Business	Mailing Address							
1131 LANCER L		1131 LANCER LN							
TARPON SPRINGS FL 34689		TARPON SPRINGS FL 346	89			DO NOT WRITE	IN THIS :	SPACE	
					÷	3. Date Incorporated or Qualifed			
						04/07/1992			1
2 Principal Pl	are of Rusiness	2a. Mailing Address				4. FEI Number		I A	pplied For
2. Principal Place of Business		26				59-3121063		$\rightarrow$	lot Applicable
Suite, Apt. i	# etc	Suite, Apt. #, etc.				<u> </u>		\$8.75	Additional
22		27				5. Certifcate of Status Desired		Fee F	Required
City & State	9	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Coul	ntry		8. This corporation owes the curren	t year Inta	ngible	
24	25	29	30			Personal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered /	gent	
				81	Name				
	inaras, shelia rene			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
1131	LANCER LN			ا "	Ottoot Addie				
TARF	PON SPRINGS FL 34689			83					
								loc   Zir	Code
				84	City		FL	85 Zir	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statu	tes, the al	LL_ bove-r	named corpo	oration submits this statement for the pr	urnose of	hanging i	ts registered
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was	authorized	I DY TH	e corporation	n's board of directors. I hereby accept	the appoir	itment as i	egistered
			ntet2 chine	itae					
agent. I a	m latinital with, and accept the conger	ions of, Section 607.0303, Fil	orida Statu	ites.					]
agent. I a	•		onda Stati	jtes.	signature required	when reinstating)	DATE		
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	onda Stati	jtes.	signature required	when reinstating)  ADDITIONS/CHANGES TO OFFI	DATE	D DIRECT	ORS IN 12
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Agent s	signature required		DATE	D DIRECT	
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AND	and title if applicable. (NOT	E: Registered	Agent s	signature required		DATE		
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered agent OFFICERS AND D GIANNARAS, SHELIA RENE	and title if applicable. (NOT	E: Registered 13. 1.1 TII	Agent s TLE			DATE		
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN	and title if applicable. (NOT	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST	Agents TLE WE REET A	DDRESS		DATE		
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL	and title if applicable. (NOT	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST	Agent s  TLE  ME  REET A	DDRESS		DATE		Addition .
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-2IP  TITLE	Signature, typed or printed name of registered agent OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P	and title if applicable. (NOT DIRECTORS DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CF 2.1 TII	Agent s TLE TLE TREET A TY-ST-2	DDRESS		DATE	Change	Addition .
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- 2IP  TITLE  NAME	Signature, typed or printed name of registered egent OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N	and title if applicable. (NOT DIRECTORS DELETE	E: Registered 13. 1.1 TT 1.2 NA 1.3 ST 1.4 CT 2.1 TT1 2.2 NA	Agent s  TLE  ME  REET A  TY-ST-7  TLE	DDRESS ZIP		DATE	Change	Addition .
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-2IP  TITLE  NAME  STREET ADDRESS	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE	and title if applicable. (NOT DIRECTORS DELETE	E: Registered 13. 1.1 TTT 1.2 NA 1.3 ST 1.4 CF 2.1 TTT 2.2 NA 2.3 ST	Agent s  TLE  WE  REET A  TLE  WE  REET A	DDRESS ZIP		DATE	Change	Addition .
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered egent OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N	and title if applicable. (NOT DIRECTORS DELETE	E: Registered 13. 1.1 TTT 1.2 NA 1.3 ST 1.4 CF 2.1 TTT 2.2 NA 2.3 ST	Agent s  TLE  ME  REET A  TY-ST-2  TLE  ME  REET A	DDRESS ZIP		DATE	Change	Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE	and title if applicable. (NOT D DIRECTORS DELETE	E: Registered 13. 1.1 TTI 1.2 NA 1.3 ST 1.4 CF 2.1 TTI 2.2 NA 2.3 ST 2.4 CI 3.1 TTI	Agent s  TLE  ME  REET A  TY-ST- TLE  ME  REET A  TY-ST-	DDRESS ZIP		DATE	Change	Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE	and title if applicable. (NOT D DIRECTORS DELETE	E: Registered 13. 1.1 TTI 1.2 NA 1.3 ST 1.4 CF 2.1 TTI 2.2 NA 2.3 ST 2.4 CI 3.1 TTI 3.2 NA	Agent s  TLE  WME  REET A  TY-ST-2  TLE  WME  REET A  TY-ST-1  TLE	DDRESS ZIP DDRESS		DATE	Change	Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST- ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE	and title if applicable. (NOT D DIRECTORS DELETE	E: Registered 13. 1.1 TT 1.2 NA 1.3 ST 1.4 CF 2.1 TTI 2.2 NA 2.3 ST 2.4 CG 3.1 TTI 3.2 NA 3.3 ST	Agent s  TLE  ME  REET A  TY-ST-  TLE  ME  REET A  TY-ST-  TLE  ME  REET A  REET A	DDRESS ZIP  DDRESS .ZIP		DATE	Change	Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE	and title if applicable. (NOT D DIRECTORS DELETE	E: Registered  13. 1.1 TT  1.2 NA  1.3 ST  1.4 CF  2.1 TTI  2.2 NA  2.3 ST  2.4 CG  3.1 TTI  3.2 NA  3.3 ST  3.4, CG	Agent s  Agent s  ILE  REET A  TY-ST-ILE  REET A  REET A  REET A  REET A  REET A	DDRESS ZIP  DDRESS .ZIP		DATE	Change	Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE	and title if applicable. (NOT D DIRECTORS DELETE	E: Registered 13. 1.1 TT 1.2 NA 1.3 ST 1.4 CF 2.1 TTI 2.2 NA 2.3 ST 2.4 CG 3.1 TTI 3.2 NA 3.3 ST 3.4 CF 4.1 TTI 4.1 TTI 4.1 TTI 4.2 TTI 4.2 TTI 4.2 TTI 4.3 TTI 4.4 TTI 4.4 TTI 4.4 TTI	Agent s  Agent s  ILE  REET A  TY-ST- ILE  ME  REET A  TTY-ST- ILE  ME  REET A  TTY-ST- ILE	DDRESS ZIP  DDRESS .ZIP		DATE	Change	Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and title if applicable. (NOT D DIRECTORS DELETE	E: Registered 13. 1.1 TTI 1.2 NA 1.3 ST 1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TTI 3.2 NA 3.3 ST 3.4 CC 4.1 TTI 4.2 NA	Agent s  Age	DDRESS ZIP  DDRESS .ZIP  DDRESS .ZIP		DATE	Change	Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and title if applicable. (NOT D DIRECTORS DELETE  DELETE  DELETE  DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 4.4 CT 4.2 NA 4.3 ST	Agent s  Agent s  LE  ME  REET A  TY-ST- LE  ME  REET A  REET A  TY-ST-  TLE  AME	DDRESS ZIP  DDRESS ZIP  DDRESS ZIP		DATE	Change	Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and title if applicable. (NOT D DIRECTORS DELETE  DELETE  DELETE  DELETE	E: Registered 13. 1.1 TTI 1.2 NA 1.3 ST 1.4 CF 2.1 TTI 2.2 NA 2.3 ST 2.4 CC 3.1 TTI 3.2 NV 3.3 ST 4.4 CF 4.2 NA 4.3 ST 4.4 CF	Agent s  Agent s  LE  ME  REET A  TY-ST- LE  TREET A  TY-ST-  TLE  TREET A  TY-ST-  TLE  TREET A  TY-ST-  TREET A	DDRESS ZIP  DDRESS ZIP  DDRESS ZIP		DATE	Change	Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and title if applicable. (NOT D DIRECTORS DELETE  DELETE  DELETE  DELETE	E: Registered 13. 1.1 TTI 1.2 NA 1.3 ST 1.4 CF 2.1 TTI 2.2 NA 2.3 ST 2.4 CC 3.1 TTI 3.2 NV 3.3 ST 4.4 CF 5.1 TTI 5. TT	Agent's Agent'	DDRESS ZIP  DDRESS ZIP  DDRESS ZIP	ADDITIONS/CHANGES TO OFFI	DATE CERS AN	Change Change	Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME	OFFICERS AND OFFICERS AND OFFICERS AND D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and title if applicable. (NOT D DIRECTORS DELETE  DELETE  DELETE  DELETE	E: Registered  13. 1.1 TI  1.2 NA  1.3 ST  1.4 CF  2.1 TII  2.2 NA  2.3 ST  2.4 CC  3.1 TII  3.2 NA  4.3 ST  4.4 CF  5.1 TI  5.2 NA	Agent's Agent'	DDRESS ZIP  DDRESS .ZIP  DDRESS .ZIP	ADDITIONS/CHANGES TO OFFI	DATE	Change Change	Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME	OFFICERS ANI OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and title if applicable. (NOT D DIRECTORS DELETE  DELETE  DELETE  DELETE	E: Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NV 3.3 ST 4.4 TI 4.2 N. 4.3 ST 4.4 CF 5.1 TI 5.2 NV 5.3 ST	Agent s  Age	DDRESS ZIP  DDRESS ZIP  DDRESS ZIP  DDRESS ZIP	ADDITIONS/CHANGES TO OFFI	DATE CERS AN	Change Change	Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and vite if applicable. (NOT D DIRECTORS DELETE  DELETE  DELETE  DELETE  DELETE	E: Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NV 3.3 ST 4.4 TI 4.2 N. 4.3 ST 4.4 CF 5.1 TI 5.2 NV 5.3 ST	Agent's Agent'	DDRESS ZIP  DDRESS ZIP  DDRESS ZIP  DDRESS ZIP	ADDITIONS/CHANGES TO OFFI	DATE CERS AN	Change Change	Addition Addition Addition Addition Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY- ST- ZIP  TITLE  NAME	OFFICERS ANI OFFICERS ANI D GIANNARAS, SHELIA RENE 1131 LANCER LN TARPON SPRINGS FL P GIANNARAS, GEORGE N 1131 LANCER LANE TARPON SPRINGS FL	and vite if applicable. (NOT D DIRECTORS DELETE  DELETE  DELETE  DELETE  DELETE	E: Registered  13. 1.1 TII 1.2 NA 1.3 ST 1.4 CF 2.1 TII 2.2 NA 2.3 ST 2.4 CC 3.1 TII 3.2 NA 4.3 ST 4.4 CF 5.1 TI 5.2 NA 5.3 ST 5.4 CF	Agents Ag	DDRESS ZIP  DDRESS ZIP  DDRESS ZIP  DDRESS ZIP	ADDITIONS/CHANGES TO OFFI	DATE CERS AN	Change Change	Addition Addition Addition Addition Addition

CITY+ST-ZIP 14. 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, you an attachment with an address with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90005 025 \*\*\*150.00