



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 36578		2. Name of Corporation Omega Sea Inc.			
3. Street Address Principal Business Office 138 SPRING ST		City NEWPORT	State RI	Zip 02840	
4. Business Phone No. 4018460066		5. State of Incorporation RHODE ISLAND		6. SIC Code 2659	
7. Brief Description of the Character of Business Conducted in Rhode Island IMPORT, SELL & DELIVER FISH PRODUCTS					
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Peter T. Moehrke		Vice President Name Karen S. Mancini			
Street Address 138 Spring Street		Street Address 138 Spring Street			
City Newport	State Rhode Island	Zip 02840	City Newport	State Rhode Island	Zip 02840
Secretary Name Karen S. Mancini		Treasurer Name Karen S. Mancini			
Street Address 138 Spring Street		Street Address 138 Spring Street			
City Newport	State Rhode Island	Zip 02840	City Newport	State Rhode Island	Zip 02840
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name N/A		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>
AUTHORIZED SHARES		ISSUED SHARES			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
5,000 NO PAR VALUE			40	Common	no par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



3 6 5 7 8

\*36578 DBC 08/16/05 08:01:17 AM\*

File Date 8/25/05

Check No. 14123

By: DA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer  
Peter T. Moehrke  
Print or Type Name of Officer  
President  
Title of Officer  
Date 8/23/05



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>36578</b>		2. Name of Corporation <b>Omega Sea Inc.</b>		
3. Street Address Principal Business Office <b>138 SPRING ST.</b>		City <b>NEWPORT</b>	State <b>RI</b>	Zip <b>02840</b>
4. Business Phone No. <b>(401)846.0066</b>		5. State of Incorporation <b>RHODE ISLAND</b>		6. SIC Code <b>2659</b>
7. Brief Description of the Character of Business Conducted in Rhode Island <b>IMPORT, SELL &amp; DELIVER FISH PRODUCTS</b>				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name <b>Peter T. Moehrke</b>		Vice President Name <b>Karen S. Mancini</b>		
Street Address <b>138 Spring Street</b>		Street Address <b>138 Spring Street</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Newport</b>	State <b>RI</b>
Secretary Name <b>Karen S. Mancini</b>		Treasurer Name <b>Karen S. Mancini</b>		
Street Address <b>138 Spring Street</b>		Street Address <b>138 Spring St.</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Newport</b>	State <b>RI</b>
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name <b>None</b>		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			ISSUED SHARES	
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series
<b>5,000 NO PAR VALUE</b>			<b>40</b>	<b>Common</b>
				<b>no par value</b>

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FILED

File Date **MAR 01 2004**  
Check No. **By 11921 GAMB**  
By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

**Karen S. Mancini** **2/10/04**  
Signature of Officer Date  
**Karen S. Mancini**  
Print or Type Name of Officer  
**Vice President**  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 36578  
2. Name of Corporation Omega Sea Inc.

3. Street Address Principal Business Office  
138 Spring Street

City State Zip  
Newport Rhode Island 02840

4. Business Phone No. (401)846-0066  
5. State of Incorporation RHODE ISLAND

6. SIC Code 2659

7. Brief Description of the Character of Business Conducted in Rhode Island

To import, sell and deliver fish products

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Vice President Name

Peter T. Moehrke

Peter T. Moehrke

Street Address

Street Address

138 Spring Street

138 Spring Street

City State Zip  
Newport Rhode Island 02840

City State Zip  
Newport Rhode Island 02840

Secretary Name

Treasurer Name

Peter T. Moehrke

Peter T. Moehrke

Street Address

Street Address

138 Spring Street

138 Spring Street

City State Zip  
Newport Rhode Island 02840

City State Zip  
Newport Rhode Island 02840

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Director Name

none

Street Address

Street Address

City State Zip

City State Zip

Director Name

Director Name

Street Address

Street Address

City State Zip

City State Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares Class/Series Par Value

Number of Shares Class/Series Par Value

5,000 NO PAR VALUE

40 Common no par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 3 6 5 7 8 \*

File Date: 3.25.03

Check No.: 13380

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer [Signature] Date March 19, 2003

Peter T. Moehrke

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Edward S. Inman, III, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903 1335  
401-222-3040



# PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No

36578

2. Name of Corporation

Omega Sea Inc.

3. Street Address Principal Business Office

138 Spring St

4. Business Phone No

401 846 0366

5. State of Incorporation

RHODE ISLAND

City

Newport

State

RI

Zip

02840

6. SIC Code

2659

7. Brief Description of the Character of Business Conducted in Rhode Island

Seafood Trading / Import / Export

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Peter Mocheke

Street Address

30 Paine Ave

City

Newport

State

RI

Zip

02840

Vice President Name

~~Karen Housh~~ Same

Street Address

City

State

Zip

Secretary Name

Peter Mocheke

Street Address

Same

City

State

Zip

Treasurer Name

Peter Mocheke

Street Address

Same

City

State

Zip

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Peter Mocheke

Street Address

Same

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

Director Name

Street Address

City

State

Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

5,000 NO PAR VALUE

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

40

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 3 6 5 7 8 \*

File Date 2-27-02

Check No. 8784

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Peter Mocheke

Print or Type Name of Officer

PRESIDENT

Title of Officer

2/26/02

Date

# PROFIT CORPORATION ANNUAL REPORT

## 1996



State of Rhode Island and Providence Plantations  
James R. Langevin, *Secretary of State*  
Corporations Division  
100 North Main Street  
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1  
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 36578		2. NAME OF CORPORATION Omega Sea Inc.	
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 138 Spring St.		CITY Newport	STATE RI
4. BUSINESS PHONE NO. 401-846-0066		5. STATE OF INCORPORATION RHODE ISLAND	6. SIC CODE 2659

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND

To import, distribute, sell and deliver fish products

### 8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME Peter T. Moehrke			VICE PRESIDENT NAME Same		
STREET ADDRESS 138 Spring st.			STREET ADDRESS		
CITY Newport	STATE RI	ZIP CODE 02840	CITY	STATE	ZIP CODE
SECRETARY NAME Same			TREASURER NAME Same		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

### 9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME Peter T. Moehrke			DIRECTOR NAME		
STREET ADDRESS 138 Spring St.			STREET ADDRESS		
CITY Newport	STATE RI	ZIP CODE 02840	CITY	STATE	ZIP CODE
DIRECTOR NAME			DIRECTOR NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

### 10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
5000 NO PAR			None		

This report must be **SIGNED IN INK** by either the  
President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

File Date: 2/8/96

Check No: 6775

By:   
For Secretary of State Use Only

Signature of Officer

Peter T. Moehrke

Print or Type Name of Officer

President

Title of Officer

2/6/96

Date



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **36578** 2. Name of Corporation **Omega Sea Inc.**

3. Street Address Principal Business Office

**138 Spring Street**

City

**Newport**

State

**Rhode Island**

Zip

**02840**

4. Business Phone No.

**(401)846-0066**

5. State of Incorporation  
**RHODE ISLAND**

6. SIC Code  
**2659**

7. Brief Description of the Character of Business Conducted in Rhode Island

**To import, sell and deliver fish products**

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City

State

Zip

**Newport**

**Rhode Island 02840**

Vice President Name

**Todd Mooers**

Street Address

**138 Spring Street**

City

State

Zip

**Newport**

**Rhode Island 02840**

Secretary Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City

State

Zip

**Newport**

**Rhode Island 02840**

Treasurer Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City

State

Zip

**Newport Rhode Island 02840**

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City

State

Zip

**Newport**

**Rhode Island 02840**

Director Name

**None**

Street Address

City

State

Zip

Director Name

**None**

Street Address

City

State

Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

**5000 NO PAR**

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

**40**

**Common**

**No par value**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 3 6 5 7 8 \*

**FILED**

File Date: **FEB 15 2001**

Check No.: **By CA 9045**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

**Peter T. Moehrke** February 11, 2001  
Signature of Officer Date

**Peter T. Moehrke**  
Print or Type Name of Officer

**President**  
Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

36578

2. Name of Corporation

Omega Sea Inc.

3. Street Address Principal Business Office

138 Spring Street

City

Newport

State

Rhode Island

Zip

02840

4. Business Phone No.

401/846-0066

5. State of Incorporation

RHODE ISLAND

6. SIC Code

2659

7. Brief Description of the Character of Business Conducted in Rhode Island

To import, sell and deliver fish products

**8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

Peter T. Moehrke

Street Address

138 Spring Street

City

State

Zip

Newport

Rhode Island 02840

Secretary Name

Peter T. Moehrke

Street Address

138 Spring Street

City

State

Zip

Newport

Rhode Island 02840

Vice President Name

Peter T. Moehrke

Street Address

138 Spring Street

City

State

Zip

Newport

Rhode Island 02840

Treasurer Name

Peter T. Moehrke

Street Address

138 Spring Street

City

State

Zip

Newport

Rhode Island 02840

**9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

Peter T. Moehrke

Street Address

138 Spring Street

City

State

Zip

Newport

Rhode Island 02840

Director Name

None

Street Address

City

State

Zip

Director Name

None

Street Address

City

State

Zip

Director Name

None

Street Address

City

State

Zip

**10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)**

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

5000 NO PAR

**11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)**

ISSUED SHARES

Number of Shares

Class/Series

Par Value

40

Common

No par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 3 6 5 7 8 \*

File Date: 1/20/00

Check No.: 7583

By: 2

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Peter T. Moehrke

Print or Type Name of Officer

President

Title of Officer

Date

1-10-00



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-222-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **38578** 2. Name of Corporation **Omega Sea Inc.**  
3. Street Address Principal Business Office **138 Spring Street** City **Newport** State **Rhode Island** Zip **02840**  
4. Business Phone No. **401/846-0066** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **2859**

7. Brief Description of the Character of Business Conducted in Rhode Island

To import, sell and deliver fish products

**8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name <b>Peter T. Moehrke</b>	Vice President Name <b>Peter T. Moehrke</b>
Street Address <b>138 Spring Street</b>	Street Address <b>138 Spring Street</b>
City <b>Newport</b>	City <b>Newport</b>
State <b>Rhode Island</b>	State <b>Rhode Island</b>
Zip <b>02840</b>	Zip <b>02840</b>
Secretary Name <b>Peter T. Moehrke</b>	Treasurer Name <b>Peter T. Moehrke</b>
Street Address <b>138 Spring Street</b>	Street Address <b>138 Spring Street</b>
City <b>Newport</b>	City <b>Newport</b>
State <b>Rhode Island</b>	State <b>Rhode Island</b>
Zip <b>02840</b>	Zip <b>02840</b>

**9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name <b>Peter T. Moehrke</b>	Director Name <b>None</b>
Street Address <b>138 Spring Street</b>	Street Address
City <b>Newport</b>	City
State <b>Rhode Island</b>	State
Zip <b>02840</b>	Zip
Director Name <b>None</b>	Director Name <b>None</b>
Street Address	Street Address
City	City
State	State
Zip	Zip

**10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)**

**AUTHORIZED SHARES**

Number of Shares	Class/Series	Par Value
------------------	--------------	-----------

**5000 NO PAR**

**11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)**

**ISSUED SHARES**

Number of Shares	Class/Series	Par Value
------------------	--------------	-----------

**40**

**Common**

**No par value**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



PAID

File Date: **MAR 04 1999**

Check No.: **RD 216592**  
**SECY OF STATE**

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

**X** **2/23/99**  
Signature of Officer Date

**Peter T. Moehrke**

Print or Type Name of Officer

**President**

Title of Officer





STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040



**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.

36578

2. Name of Corporation

Omega Sea Inc.

3. Street Address Principal Business Office

138 Spring Street

City

Newport

State

RI

Zip

02840

4. Business Phone No.

(401) 846-0066

5. State of Incorporation

RHODE ISLAND

6. SIC Code

2859

7. Brief Description of the Character of Business Conducted in Rhode Island

To import, sell and deliver fish products

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name

Peter T. Moehrke

Street Address

138 Spring Street

City

Newport

State

RI

Zip

02840

Vice President Name

Peter T. Moehrke

Street Address

138 Spring street

City

Newport

State

RI

Zip

02840

Secretary Name

Peter T. Moehrke

Street Address

138 SPring Street

City

Newport

State

RI

Zip

02840

Treasurer Name

Peter T. Moehrke

Street Address

138 Spring Street

City

Newport

State

RI

Zip

02840

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name

Peter T. Moehrke

Street Address

138 Spring Street

City

Newport

State

RI

Zip

02840

Director Name

None

Street Address

City

State

Zip

Director Name

None

Street Address

Director Name

None

Street Address

City

State

Zip

City

State

Zip

10. SHARES AUTHORIZED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

5000 NO PAR

11. SHARES ISSUED (\*X\* BOX FOR ATTACHMENT)

ISSUED SHARES

Number of Shares

Class/Series

Par Value

40

Common

No par value

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 3 6 5 7 8 \*

File Date:

Check No.:

By:

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Peter T. Moehrke

Print or Type Name of Officer

President

Title of Officer



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

James R. Langevin, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401-277-3040



**PROFIT CORPORATION ANNUAL REPORT 1997**

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED) IN BLACK

1. Corporate ID No. **36578** 2. Name of Corporation **Omega Sea Inc.**

3. Street Address Principal Business Office  
**138 Spring Street**

City **Newport** State **RI**

Zip **02840**

4. Business Phone No. **(401) 846-0066** 5. State of Incorporation **RHODE ISLAND**

6. SIC Code **2659**

7. Brief Description of the Character of Business Conducted in Rhode Island

To import, distribute, sell and deliver fish products

8. NAMES AND ADDRESSES OF THE OFFICERS (\*X\* BOX FOR ATTACHMENT)

President Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City **Newport** State **RI** Zip **02840**

Secretary Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City **Newport** State **RI** Zip **02840**

Vice President Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City **Newport** State **RI** Zip **02840**

Treasurer Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City **Newport** State **RI** Zip **02840**

9. NAMES AND ADDRESSES OF THE DIRECTORS (\*X\* BOX FOR ATTACHMENT)

Director Name

**Peter T. Moehrke**

Street Address

**138 Spring Street**

City **Newport** State **RI** Zip **02840**

Director Name

**None**

Street Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Director Name

**None**

Street Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Director Name

**None**

Street Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

10. SHARES AUTHORIZED AND ISSUED (\*X\* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

Number of Shares \_\_\_\_\_ Class/Series \_\_\_\_\_ Par Value \_\_\_\_\_

**5000 NO PAR**

ISSUED SHARES

Number of Shares \_\_\_\_\_ Class/Series \_\_\_\_\_ Par Value \_\_\_\_\_

**40 Common No par value**

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 3 6 5 7 8 \*

File Date: **8/19/97**

Check No.: **7529**

By: **ccw / JEC**

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Date

**Peter T. Moehrke**

Print or Type Name of Officer

**President**

Title of Officer

**ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.**

Corporate ID: 0036578 Annual Report for the year: 1995

Name of Corporation: Omega Sea Inc.

Business entity organized under the laws of the State of: RI

For foreign entity, address and telephone number of principal office:

N/A

Phone: ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

138 Spring Street  
Newport, RI 02840

Phone: (401) 846-0066

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:

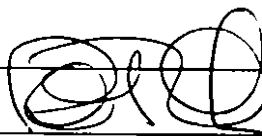
To import, distribute, sell and deliver  
fish products

THE NAMES OF THE OFFICERS ARE:			
PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Peter T. Moehrke	138 Spring Street	Newport, RI	02840
VICE PRESIDENT	STREET ADDRESS	CITY/STATE	ZIP CODE
Peter T. Moehrke	138 Spring Street	Newport, RI	02840
SECRETARY	STREET ADDRESS	CITY/STATE	ZIP CODE
Peter T. Moehrke	138 Spring Street	Newport, RI	02840
TREASURER	STREET ADDRESS	CITY/STATE	ZIP CODE
Peter T. Moehrke	138 Spring Street	Newport, RI	02840
THE NAMES OF THE DIRECTORS ARE:			
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Peter T. Moehrke	138 Spring Street	Newport, RI	02840
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
5,000	Common		

Date 3/10, 1995

By:



PRINT OR TYPE NAME OF OFFICER SIGNING

Peter T. Moehrke

TITLE OF OFFICER SIGNING

President

**DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:**

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

Joseph M. Hall  
15 Old Beach Road  
Newport, RI 02840

CK # 6211

Filing Fee \$50.00  
Payable to  
Secretary of State

PLEASE TYPE or PRINT  
State of Rhode Island and Providence Plantations  
Office of The Secretary of State  
100 North Main Street  
Providence, Rhode Island 02903 1335  
401-277-3040

File Annually  
LLC Sep. 1 - Nov. 1  
CORP Jan. 1 - March 1

Corporate ID: 0036578 Annual Report for the year: 1994

Name of Business Entity: Omega Sea Inc.

Business entity organized under the laws of the State of RI

Federal Taxpayer Identification Number

For foreign entity, address and telephone number of principal office:

N/A

Phone

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

138 Spring St.

Newport, RI 02840

(401) 846-0066

Phone

Business Entity is (check one):

- [x] Business Corporation (See RIGL Chapter 7-1.1)
- [ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
- [ ] Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Peter Moehrke  
138 Spring St.  
Newport, RI 02840

Brief statement of the character of business conducted in Rhode Island:

To import, distribute, sell and deliver fish products

Date of Organization: 11/25/85

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

Chief Executive Officer or President (See Note) Peter T. Moehrke 138 Spring St. Newport, RI 02840

Chief Operating Officer or Vice President (See Note)

Custodian of Records or Secretary (See Note) Peter T. Moehrke 138 Spring St. Newport, RI 02840

Chief Financial Officer or Treasurer (See Note) Ottar Yngvason 121 Reykjavik Iceland

THE NAMES OF THE DIRECTORS ARE:

Peter T. Moehrke 30 Prairie Ave. Newport, RI 02840

Ottar Yngvason 121 Reykjavik Iceland

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 5,000

CLASS Common

SERIES

PAR VALUE OR WITHOUT PAR No par

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER

CLASS

SERIES

PAR VALUE OR WITHOUT PAR

Date 3/7 1994 By

FILED

MAR 09 1994

By 5533

Peter T. Moehrke  
President

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC-3 must be filed.

JOSEPH M. HALL  
15 OLD BEACH ROAD  
NEWPORT RI 02840

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

4959

Corporate ID 0036573 Annual Report for the year 1993

FIRST: The name of the corporation is Omega Sea, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To import, distribute, sell and deliver fish products.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 138 Spring St., Newport, RI 02840

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Peter Moehrke</u>	<u>Director</u>	<u>30 Prairie Ave., Newport, RI 02840</u>
<u>Ottar Yngvason</u>	<u>Director</u>	<u>Reykjavik, Iceland</u>
	<u>Director</u>	
<u>Peter Moehrke</u>	<u>President</u>	<u>same</u>
<u>Ottar Yngvason</u>	<u>Vice President</u>	<u>same</u>
<u>Peter Moehrke</u>	<u>Secretary</u>	<u>30 Prairie Ave, Newport, RI 02840</u>
<u>Ottar Yngvason</u>	<u>Treasurer</u>	<u>Reykjavik, Iceland</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>5,000</u>			<u>No par</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>			<u>No par</u>

Dated 2/1 1993

Omega Sea Inc.  
(Name of Corporation)

By Peter Moehrke

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

ch# 4275

Corporate ID 0026578 Annual Report for the year 1992

FIRST: The name of the corporation is Omega Sea Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To import, distribute, sell and deliver fish products.

FOURTH: If foreign corporation, address of its principal office.

FIFTH: Business address in Rhode Island 138 Spring Street, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Peter Moehrke	Director	138 Spring Street, Newport, RI 02840
Ottar Yngvason	Director	Reykjavik, Iceland
Patricia Emlock Lynch	Director	7 Eastnor Extension, Newport, RI 02840
Peter Moehrke	President	138 Spring Street, Newport, RI 02840
Patricia Emlock Lynch	Vice President	7 Eastnor Extension, Newport, RI 02840
Peter Moehrke	Secretary	138 Spring Street, Newport, RI 02840
Ottar Yngvason	Treasurer	Reykjavik, Iceland

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000			No par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			No par

PAID

FEB 21 1992

SECY OF STATE

Dated 2/18 1992

Omega Sea Inc.  
(Name of Corporation)

By [Signature]  
Peter Moehrke  
Title President

(Report must be signed by an officer)

Filing Fee \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0036578 Annual Report for the year 1991

FIRST: The name of the corporation is Omega Sea Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To import, distribute, sell  
and deliver fish products

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 138 Spring Street, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Peter Moehrke	Director	138 Spring Street, Newport, RI 02840
Ottar Yngvason	Director	Reykjavik, Iceland
Patricia Emlock	Director	7 Eastnor Extension, Newport, RI 02840
Peter Moehrke	President	138 Spring Street, Newport, RI 02840
Patricia Emlock	Vice President	7 Eastnor Extension, Newport, RI 02840
Peter Moehrke	Secretary	138 Spring Street, Newport, RI 02840
Ottar Yngvason	Treasurer	Reykjavik, Iceland

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000			no par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			no par

PAID

FEB 21 1991

SECRETARY OF STATE

Dated 2/19/91

Omega Sea Inc.

(Name of Corporation)

By Peter Moehrke

Title President

(Report must be signed by an officer)

Filing Fee, \$50.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0036578 Annual Report for the year 1990

FIRST: The name of the corporation is Omega Sea Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To import, distribute, sell and  
deliver fish products

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 138 Spring Street, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Peter Moehrke</u>	<u>Director</u>	<u>138 Spring Street, Newport, RI 02840</u>
<u>Ottar Yngvason</u>	<u>Director</u>	<u>Reykjavik, Iceland</u>
<u>Patricia Emlock</u>	<u>Director</u>	<u>7 Eastnor Extension, Newport, RI 02840</u>
<u>Peter Moehrke</u>	<u>President</u>	<u>138 Spring Street, Newport, RI 02840</u>
<u>Patricia Emlock</u>	<u>Vice President</u>	<u>7 Eastnor Extension, Newport, RI 02840</u>
<u>Peter MOehrke</u>	<u>Secretary</u>	<u>138 Spring Street, Newport, RI 02840</u>
<u>Ottar Yngvason</u>	<u>Treasurer</u>	<u>Reykjavik, Iceland</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>5,000</u>			<u>no par</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>			<u>no par</u>

Dated 2/19 19 91

(Report must be signed by an officer)

**PAID**  
**FEB 21 1991**  
**CLERK OF STATE**

Omega Sea Inc.  
(Name of Corporation)  
By [Signature]  
Peter Moehrke  
Title President



Filing Fee \$15.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND 02903

*PLP*

Corporate ID 0036578 Annual Report for the year 1989

FIRST: The name of the corporation is Omega Sea Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To import, distribute, sell and deliver fish products including scallops and shrimp as well as any other lawful purpose permitted under the laws of the State of Rhode Island

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 138 Spring Street, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
------	--------	--

	Director	
	Director	
	Director	
<u>Peter Moehrke</u>	President	<u>138 Spring Street, Newport, RI</u>
<u>Patricia Emlock</u>	Vice President	<u>138 Spring Street, Newport, RI</u>
<u>Peter Moehrke</u>	Secretary	<u>138 Spring Street, Newport, RI</u>
<u>Ottar Yngvason</u>	Treasurer	<u>138 Spring Street, Newport, RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000	A		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	A		no par value

Dated August 1 19 89

Omega Sea Inc.

(Name of Corporation)

By Patricia A. Emlock

Title Vice President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

10.47

Corporate ID.....26528..... Annual Report for the year.....1988

FIRST: The name of the corporation is.....Omega Sea, Inc.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is to import, distribute, sell and deliver fish products including scallops and shrimp as well as any other lawful purpose permitted under the laws of the State of Rhode Island.

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 138 Spring Street  
Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
.....	Director	.....
.....	Director	.....
.....	Director	.....
Peter Moehrke	President	138 Spring Street, Newport, RI
Patricia Emlock	Vice President	138 Spring Street, Newport, RI
Peter Moehrke	Secretary	138 Spring Street, Newport, RI
Ottar Yngvason	Treasurer	138 Spring Street, Newport, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5,000	A		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	A		no par value

Dated Feb. 25 1988

PAID  
MAR 22 1988  
SECY. OF STATE  
Omega Sea, Inc.  
(Name of Corporation)

By [Signature]

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between  
January 1st and March 1st

# State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 36578

Annual Report for the year 1987

FIRST: The name of the corporation is Omega Sea Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to import, distribute, sell and deliver fish products including scallops and shrimp as well as any other lawful purpose permitted under the laws of the State of Rhode Island.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Bellevue Avenue, Newport, Rhode Island 02840

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Director

Director

Director

Peter Moehrke President Bellevue Avenue, Newport, Rhode Island 08240

Ottar Yngvason Vice President

Peter Moehrke Secretary Bellevue Avenue, Newport, Rhode Island 08240

Ottar Yngvason Treasurer

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

5,000

A

Par Value  
or statement that  
shares are without  
par value

No par value

EIGHTH: Number of Shares issued:

MAR 20 1987

No. of Shares

Class

Series

100

A

SECY. OF STATE

Par Value  
or statement that  
shares are without  
par value

No par value

Dated 3/13 1987

Omega Sea, Inc.

(Name of Corporation)

By

(Report must be signed by an officer)

Title President

## State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION  
270 WESTMINSTER MALL  
PROVIDENCE, RHODE ISLAND 02903Corporate ID 36578 Annual Report for the year 1986FIRST: The name of the corporation is Omega Sea Inc.SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is to import, distribute, sell and deliver fish products including scallops and shrimp as well as any other lawful purpose permitted under the laws of the State of Rhode Island

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island Bellevue Avenue, Newport, RI 02840

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Peter Moehrke	President	Bellevue Avenue, Newport, RI 02840
Ottar Yngvason	Vice President	
Peter Moehrke	Secretary	Bellevue Avenue, Newport, RI 02840
Ottar Yngvason	Treasurer	

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
5000	A		no par value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	A		no par value

Dated Feb. 6 19 86

Omega Sea, Inc.

(Name of Corporation)

By

Title President

(Report must be signed by an officer)