


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P01000104587

1. Entity Name
DANMAR SEAFOOD INC.



Principal Place of Business
14714 SHERROD CROFT LANE
DADE CITY, FL 33525

Mailing Address
14714 SHERROD CROFT LANE
DADE CITY, FL 33525



02202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3753430

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CUESTA, DANIEL R
14714 SHERROD CROFT LANE
DADE CITY, FL 33525

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P	NAME CUESTA, DANIEL R
STREET ADDRESS 14714 SHERROD CROFT LANE	CITY-ST-ZIP DADE CITY, FL 33525
TITLE ST	NAME CUESTA, MARTHA L
STREET ADDRESS 14714 SHERROD CROFT LANE	CITY-ST-ZIP DADE CITY, FL 33525
TITLE NAME	STREET ADDRESS CITY-ST-ZIP
TITLE NAME	STREET ADDRESS CITY-ST-ZIP
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TITLE NAME	STREET ADDRESS CITY-ST-ZIP

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 04/27/07-80072-021 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daniel R. Cuesta* **4/13/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #