

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

03-22-2002 90026 033 \*\*\*150.00

# 2002 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # P01000107973**

1. Entity Name

SILVER HOOK SEAFOOD, INC.

Principal Place of Business

526 CENTRAL AVENUE  
 SUITE 200  
 ST. PETERSBURG FL 33701

Mailing Address

526 CENTRAL AVENUE  
 SUITE 200  
 ST. PETERSBURG FL 33701

2. Principal Place of Business

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

4. FEI Number

59-3755398

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

OWEN, JR., GEORGE E  
 144 FIRST AVENUE SOUTH  
 SUITE 500  
 ST. PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete  
 DP HERETICK, MICHAEL  
 STREET ADDRESS 3049 BIRMINGHAM BLVD.  
 CITY-ST-ZIP ORLANDO FL 32829

TITLE NAME ☐ Delete  
 DV HAMMERMAN, THEODORE  
 STREET ADDRESS 704 DOGWOOD AVENUE  
 CITY-ST-ZIP MYRTLE BEACH SC 29577

TITLE NAME ☐ Delete  
 DST CARONONGAN, VINCENT S  
 STREET ADDRESS 12645 49TH STREET NORTH  
 CITY-ST-ZIP CLEARWATER FL 33782

TITLE NAME ☐ Delete  
 D HERETICK, KEN  
 STREET ADDRESS 526 CENTRAL AVENUE, STE 200  
 CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE NAME ☐ Delete  
 D HERETICK, PAUL  
 STREET ADDRESS 526 CENTRAL AVENUE, STE 200  
 CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/7/02

727-573-5088

CR2E034 (9/01)