

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000107973

1. Entity Name
SILVER HOOK SEAFOOD, INC.



Principal Place of Business

**125 5TH ST. SOUTH
STE. 201
SAINT PETERSBURG, FL 33701-4111**

Mailing Address

**125 5TH ST. SOUTH
STE. 201
SAINT PETERSBURG, FL 33701-4111**



01102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3755398

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HERETICK, MICHAEL
STREET ADDRESS	3619 SEMINOLE DR.
CITY-ST-ZIP	ORLANDO, FL 32812
TITLE	DV
NAME	HAMMERMAN, THEODORE
STREET ADDRESS	704 DOGWOOD AVENUE
CITY-ST-ZIP	MYRTLE BEACH, SC 29577
TITLE	DST
NAME	CARONONGAN, VINCENT S.
STREET ADDRESS	12645 49TH STREET NORTH
CITY-ST-ZIP	CLEARWATER, FL 33762
TITLE	D
NAME	HERETICK, KEN
STREET ADDRESS	125 5TH ST. SOUTH, STE. 201
CITY-ST-ZIP	SAINT PETERSBURG, FL 337014111
TITLE	D
NAME	HERETICK, PAUL
STREET ADDRESS	125 5TH ST. SOUTH, STE. 201
CITY-ST-ZIP	SAINT PETERSBURG, FL 337014111
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000503971
04/26/06-80053-009 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-6-06

Date

727-573-5088

Daytime Phone #