

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 A**  
**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



01242007 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, 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 NAME STREET ADDRESS CITY-ST-ZIP	DP HERETICK, MICHAEL 3619 SEMINOLE DR. ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HAMMERMAN, THEODORE 704 DOGWOOD AVENUE MYRTLE BEACH, SC 29577
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST CARONONGAN, VINCENT S 12645 49TH STREET NORTH CLEARWATER, FL 33762
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERETICK, KEN 125 5TH ST. SOUTH, STE. 201 SAINT PETERSBURG, FL 337014111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERETICK, PAUL 125 5TH ST. SOUTH, STE. 201 SAINT PETERSBURG, FL 337014111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000672542  
03/28/07-80071-024 150.00

**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

3-17-07 727-523-5088

Date

Daytime Phone #