

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Sep 27, 2004 8:00 am**  
**Secretary of State**

8/26

08-26-2004 90004 009 \*\*\*150.00

**DOCUMENT # P03000136060**



1. Entity Name

DAVID & SONS SEAFOOD, INC.

Principal Place of Business

344 PATTON DR  
EASTPOINT FL 32328

Mailing Address

P.O. BOX 690  
EASTPOINT FL 32328

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0564025

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SASNETT, AUBREY D  
344 PATTON DR  
EASTPOINT FL 32328

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. 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 \$550.00**

**DUE BY September 8, 2004**

**Make Check Payable to Florida Department of State**

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME President  
STREET ADDRESS Aubrey David Sasnett  
CITY-ST-ZIP P.O. Box 690  
EASTPOINT, FL 32328

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS Kenny Fox  
CITY-ST-ZIP 3678 Hwy 39  
Braithwaite, LA 70040

TITLE ☐ Delete  
NAME VP  
STREET ADDRESS Rodney L. Fox  
CITY-ST-ZIP 101 Victoria Dr.  
Belle Chasse, LA 70037

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

8/23/04

856-670-8888

Date

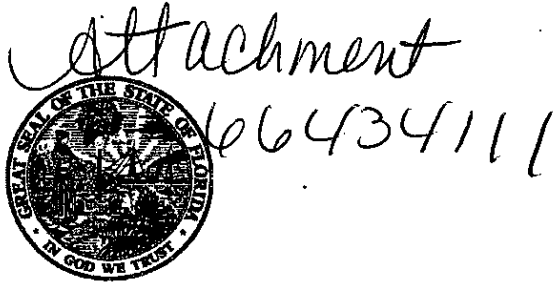
Daytime Phone #

66434111



MOORE

CR2E034 (4/04)



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

August 30, 2004

DAVID & SONS SEAFOOD, INC.  
P.O. BOX 690  
EASTPOINT, FL 32328

Subject: DAVID & SONS SEAFOOD, INC.

Reference Number: P03000136060

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

**TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION,  
PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF  
CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-  
1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/RH

ANNUAL REPORTS SECTION

Attachment  
66434111 Sept. 21.04

To whom it may concern:  
# P03000136060

I did not receive prior notice  
about the fee to file. Please  
Waiver the \$400<sup>00</sup> late fee.

David & Son's Sfd, Inc.


P.O. Box 690

EastPoint, FL 32328

850-670-8888

FEI No# 20-0564025

Thank you,

A large, stylized handwritten signature, possibly reading "C. Smith" or similar, written in dark ink.