


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jul 07, 2004 08:00 AM
Secretary of State**

DOCUMENT # P93000020589 1. Entity Name SHRIMP CULTURE II, INC.	
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Principal Place of Business 11430 SW 88TH ST., #309 MIAMI, FL 33176	Mailing Address 11430 SW 88TH ST., #309 MIAMI, FL 33176
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07012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0464984	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GARZON, HAMMERIS V
13370-C SW 91 TERR
MIAMI, FL 33186

**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
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	HEERIN, JAMES E
STREET ADDRESS	300 GRIMES BRIDGGE ROAD
CITY-ST-ZIP	ROSWELL, GA 30075
TITLE	P
NAME	PARKMAN, RALPH W
STREET ADDRESS	8265 SW 177TH TERRACE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	VP
NAME	PENDLETON, KIRK P
STREET ADDRESS	75 JAMES WAY
CITY-ST-ZIP	SOUTHAMPTON, PA 18966
TITLE	S
NAME	GARZON, HAMMERIS V
STREET ADDRESS	13370-C SW 91 TERR
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/07/04-80001-018 150.00

**DO NOT WRITE
IN THIS SPACE**

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

H AMMERIS GARZON

Date

7/1/04

Daytime Phone #

305-5950030