FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT

1995 S10995 B66134 NC

FILED BY DEPARTMENT OF STATE
Sandra Mortham
Secretary of State

DOCUMENT # P93000074772 (3)

1. Current Name
L & J HUGGINS SEAFOOD CORPORATION

Principal Place of Business
10290 W CENTRAL ST
HOMOSASSA FL 34446

Mailing Address
10290 W CENTRAL ST
HOMOSASSA FL 34446

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/18/1993

3a. Date of Last Report: 04/29/1994

2. Principal Office Address
21

2a. Mailing Address
26

4. FEI Number: 59-3206913 ☐ Applied For ☐ Not Applicable

Suite, Apt. or Unit
22

Suite, Apt. or Unit
27

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

City & State
23

City & State
28

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

ZIP
24

County
25

ZIP
29

County
30

8. This corporation has liability for intangible tax under § 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HUGGINS, JAMES T JR.
10290 W CENTRAL ST
HOMOSASSA FL 34446

10. Name and Address of New Registered Agent

81 Name

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

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.1008, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent (am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes).

SIGNATURE

12. OFFICER AND/OR DIRECTOR		13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS
Title	PD	☐ Change ☐ Addition
Name	HUGGINS, JAMES T JR.	
Street Address	10290 W CENTRAL ST	
City-State-Zip	HOMOSASSA FL 34446	
Title	D	☐ Change ☐ Addition
Name	HUGGINS, LENA M	
Street Address	10290 W CENTRAL ST	
City-State-Zip	HOMOSASSA FL 34446	
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		
Title		☐ Change ☐ Addition
Name		
Street Address		
City-State-Zip		

14. I (we) hereby certify that the information supplied with this filing is true and accurate and that my (our) 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 above, or on an attachment with all other like empowered.

SIGNATURE: Lena Huggins LENA Huggins 5-4-95 904-628-6264

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0352294 CP