

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Washington, D.C. 20540

Secretary of State

1995 5-10-95 B-6613-NC

APPROVED
AND
FILED

MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000074772 (3)

For Corporation Number

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

4. FEI Number

59-3206913

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

6. This corporation has liability for intangible tax under S. 199.032
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21. State

22. City & State

23. City & State

24. City & State

2a. Mailing Address

26. State

27. City & State

28. City & State

29. City & State

30. City & State

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. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.01(1) and 607.1508, Florida Statutes, the above named corporation submits the 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. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 607.01(1) and 607.1508, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent for the Corporation

Signature of Registered Agent for the Corporation (Required when new agent)

Date

12. OFFICERS AND DIRECTORS

12a. Name

12b. Title

12c. Address

12d. City

12e. State

12f. Zip

12g. City

12h. State

12i. Zip

12j. City

12k. State

12l. Zip

12m. City

12n. State

12o. Zip

12p. City

12q. State

12r. Zip

12s. City

12t. State

12u. Zip

12v. City

12w. State

12x. Zip

12y. City

12z. State

12aa. Zip

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. Name

13b. Title

13c. Address

13d. City

13e. State

13f. Zip

13g. City

13h. State

13i. Zip

13j. City

13k. State

13l. Zip

13m. City

13n. State

13o. Zip

13p. City

13q. State

13r. Zip

13s. City

13t. State

13u. Zip

13v. City

13w. State

13x. Zip

13y. City

13z. State

13aa. Zip

☐ Change ☐ Addition

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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), Florida Statutes. I further certify that the information included on this annual report or supplementary annual 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 the report as required by Chapter 160, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing or on an alternate filing with an address.

SIGNATURE:

Lena Huggins LENA HUGGINS

5-4-95

904-628-6264

SIGNATURE AND TITLE OF PERSON IN CHARGE OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number