

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000049639

Entity Name: HANSON'S SEAFOOD, INC.

FILED
Jan 30, 2007
Secretary of State

Current Principal Place of Business:

592 NE 185 ST
MIAMI, FL 33179

New Principal Place of Business:

12950 W DIXIE HIGHWAY
NORTH MIAMI, FL 33161

Current Mailing Address:

592 NE 185 ST
MIAMI, FL 33179

New Mailing Address:

12950 W DIXIE HIGHWAY
NORTH MIAMI, FL 33161

FEI Number: 65-0507177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, JAMES D JR.
2442 ARCH CREEK DR
NORTH MIAMI, FL 33181 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HANSON, JAMES D JR.
Address: 2442 ARCH CREEK DRIVE
City-St-Zip: NORTH MIAMI, FL 33181

Title: SD () Delete
Name: HANSON, RAEGAN
Address: 2442 ARCH CREEK DR
City-St-Zip: NORTH MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 an address, with all other like empowered.

SIGNATURE: JAMES D HANSON, JR

PRES

01/30/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date