## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P95000091388

21251 CARTER RD

ESTERO, FL 33928

Address:

City-St-Zip:

Entity Name: D & M SEAFOOD INC

FILED Nov 06, 2005 Secretary of State

		W 00B 1140.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
15820 S TAMIAMI TRAIL FT MYERS, FL 33908				15820 S TAMIAMI TR FT MYERS, FL 33908		
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
15820 S TAMIAMI TRAIL FT MYERS, FL 33908				2899 W. CROOKED STICK CT. LECANTO, FL 34461		
FEI Number:	: 65-0628208	FEI Number Applied For ( )	FEI Number Not Appl	icable()	Certificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
15820 S T	SON, MARK TAMIAMI TR S, FL 33908	US	2899 W. CI	HENDERSON, MARK 2899 W. CROOKED STICK CT LECANTO, FL 34461 US		
The above in the State	named entity s e of Florida.	ubmits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	RE:			11/06/2005		
	Electron	c Signature of Registered Age	nt		Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	VPD () HENDERSON, I 21251 CARTER ESTERO, FL 33	RD	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PD () HENDERSON, M 18502 MARCO FT MYERS, FL	BLVD	Title: Name: Address: City-St-Zip:	HENDERSON	OKED STICK CT.	
Title: Name: Address: City-St-Zip:	S () HENDERSON, L 18502 MARCO FT MYERS, FL	BLVD	Title: Name: Address: City-St-Zip:	HENDERSON	OKED STICK CT.	
Title: Name:	T () HENDERSON, F	Delete RANELL	Title: Name:	(	) Change ()Addition	

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

Address:

City-St-Zip:

SIGNATURE: LAURA HENDERSON SEC 11/06/2005