2005 FOR PROFIT. CORPORATION ANNUAL REPORT

SIGNATURE:

Feb 10, 2005 08:00 AM **DOCUMENT # P97000092909 Secretary of State** CAPTAIN BRAD'S SEAFOOD, INC. Principal Place of Business Mailing Address 4006 SHOAL LINE BLVD 4006 SHOAL LINE BLVD SPRING HILL, FL 34607 US SPRING HILL, FL 34607 US 02072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3494967 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent BRADLEY, JAMES R SR. DO NOT WRITE 6690 RICHARD DRIVE SPRING HILL, FL 34607 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) FILE NOW!!! FEE IS \$150.00 After May, 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. П Added to Fees 10. OFFICERS AND DIRECTORS D TITLE NAME BRADLEY, MELISSA STREET ADDRESS **15405 PENNY CT** UMORMO223159 SHADY HILLS, FL 34601 02/10/05-80035-001 150.00 CITY-ST-7IP TITLE BRADLEY, JAMES R JR. STREET ADDRESS 6690 RICHARD DRIVE CITY-ST-ZIP SPRING HILL, FL 34607 BRADLEY, JAMES R SR NAME STREET ADDRESS 6690 RICHARD DRIVE DO NOT WRITE CITY-ST-ZIP SPRING HILL, FL 34607 TITLE IN THIS SPACE BRADLEY, DEBORAH C NAME STREET ADDRESS 6690 RICHARD DRIVE SPRING HILL, FL 34607 CITY-ST-ZIP nn e NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.

FILED

Daytime Phone #