2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000015405

Entity Name: B & E SEAFOOD, INC.

Title:

Name:

Address:

City-St-Zip:

FILED Jan 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 15850 OAK STREET CEDAR KEY, FL 32625 **Current Mailing Address: New Mailing Address:** PO BOX 16086 FERNANDINA BEACH, FL 32035 FEI Number: 59-3493396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **AMERILAWYER** 343 ALMERIA AVENUE US CORAL GABLES, FL 33134 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BECKHAM, WALTER M II Name: Name: 85269 SHINNECOCK HILLS DR Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: Title: VD Title: () Change () Addition () Delete EDMUNDS, KENNETH A Name: Name: PO BOX 534 Address: Address: CEDAR KEY, FL 32625 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition EDMUNDS, VANESSA D Name: Name: PO BOX 534 Address: Address: City-St-Zip: CEDAR KEY, FL 32625 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: WALTER M. BECKHAM II PRES 01/29/2006

() Delete

85269 SHINNECOCK HILLS DR

FERNANDINA BEACH, FL 32034

BECKHAM, ANGELA M '

(X) Change () Addition

BECKHAM, ANGELA M

85269 SHINNECOCK HILLS DR

FERNANDINA BEACH, FL 32034