2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S24681

Entity Name: INLET SEAFOOD MARKET, INC.

FILED Jan 30, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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22 N CAUSEWAY DR. FT. PIERCE, FL 34946 US

Current Mailing Address: New Mailing Address:

PO BOX 3604 FT PIERCE, FL 34948

FEI Number: 65-0238531 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:

BLACK, GLEN J

22 NORTH CAUSEWAY DRIVE
FT PIERCE, FL 34949 US

MACON, GLENDA S

22 NORTH CAUSEWAY DRIVE
FT PIERCE, FL 34949 US

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: GLENDA MACON 01/30/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: MGR (X) Change () Addition Name: BLACK, GLEN J, Name: MACON, GLENDA S

 Address:
 22 N CAUSEWAY DR
 Address:
 22 N CAUSEWAY DR

 City-St-Zip:
 FT PIERCE, FL 34948
 City-St-Zip:
 FT PIERCE, FL 34948

Title: D () Delete Title: () Change () Addition
Name: CATHY HEGEDUS, Name:
Address: 22 N CAUSEWAY DR Address:

Address: 22 N CAUSEVAY DR Address:
City-St-Zip: FT. PIERCE, FL 34948 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 TAMMY CASSON,
 Name:

 Address:
 22 N CAUSEWAY DR
 Address:

 City-St-Zip:
 FT. PIERCE, FL 34948
 City-St-Zip:

Title: DST (X) Delete Title: () Change () Addition

 Name:
 GLENDA MACÓN,
 Name:

 Address:
 22 N CAUSEWAY DR
 Address:

 City-St-Zip:
 FT. PIERCE, FL 34948
 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: GLENDA MACON MGR 01/30/2006