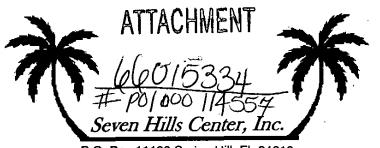
2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jul 15, 2008 8:00 am Secretary of State 04-09-2008 90021 016 ***150 00 DOCUMENT # P01000114557 1. Entity Name SEVÉN HILLS CENTER, INC. Principal Place of Business Mailing Address 66015334 P.O. BOX 11188 PO BOX 11188 SPRING HILL, FL 34610 SPRING HILL, FL 34610 07102008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3759720 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HASHEMIAN, MICHAEL DO NOT WRITE 1214 MARINER BLVD SPRING HILL, FL 34609 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) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 12, 2008 Added to Fees OFFICERS AND DIRECTORS 10. DPST TITLE HASHEMIAN, MICHAEL NAME STREET ADDRESS 1214 MARINER BLVD CITY-ST-ZIP SPRING HILL, FL 34609 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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.

STREET ADDRESS CITY-ST-ZIP

FILED



P.O. Box 11188 Spring Hill, FL 34610 Phone (352) 686-4634 • Fax (352) 686-4634

January 10, 2008

Division of Corporations P.O. Box 6198 Tallahassee, FL 32314

RE: Profit Corporation Annual Report

To whom it may concern,

On March 24, 2008 we sent in our Profit Corporation Annual Report with a check for \$150.00, unfortunately we forgot to sign the report so in about two weeks later we received the report back asking us to sign and return the report.

Two days later, we sent back the signed report to the address that was shown in the letter. We are not sure why you have not received that signed paper as of yet.

Today I spoke with one of your representatives, and she stated that as of today the Division of Corporation does not show a signed report from us.

Attached to this letter, please find another signed report for our corporation.

If you have any questions or concerns regarding this matter please do not hesitate to call me at (352) 346-2260.

Sincerely,

Mary Hashemian

Seven Hills Center, Inc.