## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 02, 2004 08:00 AM **DOCUMENT # P98000067090 Secretary of State** 1. Entity Name PUSH HARD CATTLE COMPANY INC. Mailing Address Principal Place of Business 190 WOODCREST DRIVE 190 WOODCREST DRIVE FORT PIERCE, FL 34945 FORT PIERCE, FL 34945 01152004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0853131 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HAMNER, CHARLES W 190 WOODCREST DRIVE FORT PIERCE, FL 34945 IN THIS SPACE 3. 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 primed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE U000000074137 Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 $\Box$ Trust Fund Contribution. Added to Fees 03/03/04-80005-024 150.00 OFFICERS AND DIRECTORS 10. TITLE HAMNER, CHARLES W NAME STREET ADDRESS 190 WOODCREST DRIVE COY-ST-ZIP FORT PIERCE, FL 34945 TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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

SIGNATURE:

NAME STREET ACCRESS CITY-ST-ZIP

CHARLES W. HAMNER 2/27/04

72-201-7673

**FILED**