

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000048369

Entity Name: HELLO NEVADA, INC.

FILED
Sep 19, 2008
Secretary of State

Current Principal Place of Business:

324 W GORE STREET
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

324 W GORE STREET
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-3646777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWANN & HADLEY, P.A.
1031 W MORSE BLVD,
STE 350
WINTER PARK, FL 327893750 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MEARS, PAUL S JR
Address: 324 W GORE ST
City-St-Zip: ORLANDO, FL 32806

Title: DP () Delete
Name: MEARS, PAUL S III
Address: 324 W GORE ST
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: MEARS, JAMES B
Address: 324 W GORE ST
City-St-Zip: ORLANDO, FL 32806

Title: ST () Delete
Name: BAKER, TIMOTHY L
Address: 324 W GORE STREET
City-St-Zip: ORLANDO, FL

Title: CEO () Delete
Name: CARNS, CHARLES E JR
Address: 324 W GORE STREET
City-St-Zip: ORLANDO, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: EVP () Change (X) Addition
Name: FORD, DANIEL W
Address: 324 W GORE STREET
City-St-Zip: ORLANDO, FL 32806

I hereby certify that the information supplied with this filing does not qualify 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: TIMOTHY L BAKER

ST

09/19/2008

Electronic Signature of Signing Officer or Director

Date