

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 005120

FILED
Jan 03, 2008
Secretary of State

Entity Name: HOPKINS-CARTER COMPANY

Current Principal Place of Business:

3300 N W 21ST STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

3300 N W 21ST STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 59-0979882 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTERSON, WILLIAM P
3300 NW 21ST ST
MIAMI, FL 33142 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MASTERSON, WILLIAM P, . JR
Address: 6380 S.W. 85TH ST.
City-St-Zip: MIAMI, FL

Title: T () Delete
Name: CARTER, TINSLEY B.,
Address: 724 TURKEY FOOT ROAD
City-St-Zip: FOREST, VA

Title: S () Delete
Name: MASTERON, LEE ANN,
Address: 4811 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL

Title: VP () Delete
Name: QUIROS, MARIA
Address: 3701 NW 21 STREET
City-St-Zip: MIAMI, FL 33142

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MASTERSON, WILLIAM P, . JR
Address: 3300 NW 21 STREET
City-St-Zip: MIAMI, FL 33142

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

Title: S (X) Change () Addition
Name: MASTERON, LEE ANN,
Address: 3300 NW 21 STREET
City-St-Zip: MIAMI, FL 33142

Title: VP (X) Change () Addition
Name: QUIROS, MARIA
Address: 3300 NW 21 STREET
City-St-Zip: MIAMI, FL 33142

Title: VP () Change (X) Addition
Name: LUNGER, DAVID
Address: 3300 NW 21 STREET
City-St-Zip: MIAMI, FL 33142

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: WILLIAM PARKS MASTERSON

PD

01/03/2008

Electronic Signature of Signing Officer or Director

Date