

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 389938

Entity Name: HAWAIIAN ISLE ESTATES, INC.

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

500 CARSWELL AVE.  
HOLLY HILL, FL 321174412

## New Principal Place of Business:

## Current Mailing Address:

500 CARSWELL AVE.  
HOLLY HILL, FL 321174412

## New Mailing Address:

FEI Number: 59-1438845

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAMUELS, LOUIS P.  
500 CARSWELL AVE.  
HOLLY HILL, FL 32017 US

## Name and Address of New Registered Agent:

SAMUELS, LOUIS P.  
500 CARSWELL AVE.  
HOLLY HILL, FL 321174412 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:

Electronic Signature of Registered Agent

04/19/2006

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SAMUELS, LOUIS P.,  
Address: 500 CARSWELL AVE.  
City-St-Zip: ORMOND BEACH, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SAMUELS, LOUIS P.,  
Address: 500 CARSWELL AVE.  
City-St-Zip: HOLLY HILL, FL 321174412

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: LOUIS P SAMUELS

PD

04/19/2006

Electronic Signature of Signing Officer or Director

Date