2008 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # F01000001115** 01-22-2008 90043 026 ***150.00 NA HOKU, INC. Mailing Address Principal Place of Business 3049 UALENA STREET, 14TH FL 3049 UALENA STREET, 14TH FL HONOLULU, HI 96819-1942 US HONOLULU, HI 96819-1942 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01142008 Chg-P CR2E034 (12/06) Applied For 4. FEI Number City & State City & State 99-0081236 Not Applicable Ζiρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HAY, TIM Street Address (P.O. Box Number is Not Acceptable) 7680 UNIVERSAL BLVD., STE 520 ORLANDO FL 32819 Zip Code FΙ 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS TITLE ☐ Delete TITLE ☐ Addition SULTAN JR, EDWARD D NAME NAME STREET ADDRESS 1525 WILDER AVE PH2 STREET ADDRESS CITY-ST-ZIP HONOLULU, HI 96822 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition SULTAN III, EDWARD D NAME NAME 1039 WAIHOLO STREET STREET ADORESS STREET ADDRESS CITY-ST-ZIP HONOLULU, HI 96821 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE BOOKATZ, STEVEN J NAME MAME 47-136 UAKOKO PLACE STREET ADDRESS STREET ADDRESS KANEOHE, HI 96744 CITY-ST-ZIP CITY - ST - ZIF Treasurer (A) Change TITLE Delete THILE ☐ Addition Flanagan, Linda L. 1164 Namahealani Place FLANAGAN, LINDA L NAME NAME STREET ADDRESS 1164 NAMAHEALANI PLACE STREET ADDRESS Honolulu, HI 96825 HONOLULU, HI 96825 CITY-ST-ZIP CITY-ST-ZIP Secretary Scherer, Roschelle 92-5026 Limukele St. **■**XAddition TITLE Delete TITLE ☐ Change PRATER, LAWRENCE S NAME NAME 360 KUANALU PLACE STREET ADDRESS STREET ADDRESS Kapolei, HI CITY-ST-ZIP CITY-ST-ZIP HONOLULU, HI 96825 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 on 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.

auafdu Linda L. Flanagan

SAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Jan 22, 2008 8:00 am

(808)833-7772

Daytime Phone #

01/14/08