


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # F01000003178		
1. Entity Name HERMES INVESTMENT CO., INC.		
Principal Place of Business 220 BUSH STREET, SUITE 1100 SAN FRANCISCO, CA 94104	Mailing Address 220 BUSH STREET, SUITE 1100 SAN FRANCISCO, CA 94104	



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 94-2475366	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KEYES, WILLIAM A JR
2125 FIRST STREET, SUITE 101
FORT MYERS, FL 33901**

**DO NOT WRITE
IN THIS SPACE**

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)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	CPS
NAME	MANN, ROBERT H
STREET ADDRESS	220 BUSH STREET, SUITE 1100
CITY-ST-ZIP	SAN FRANCISCO, CA 94104

TITLE	D
NAME	KALINSKI, ITZHAK Z
STREET ADDRESS	220 BUSH STREET SUITE 1100
CITY-ST-ZIP	SAN FRANCISCO, CA 94104

TITLE	D
NAME	HO, VIET
STREET ADDRESS	220 BUSH STREET SUITE 1100
CITY-ST-ZIP	SAN FRANCISCO, CA 94104

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/31/08-80002-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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 or 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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT H. MANN

1/23/08
Date

(415) 398-4251
Daytime Phone #