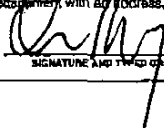


FILED
Aug 10, 2005 8:00 am
Secretary of State

08-10-2005 90016 046 ***150.00

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F04000004797		
1. Entity Name HOTBAR.COM, INC.		
Principal Place of Business 1572 BRIAR OAK DRIVE ROYAL PALM BEACH, FL 33411		Mailing Address 1572 BRIAR OAK DRIVE ROYAL PALM BEACH, FL 33411 226 W 37th St, 11 Floor New York NY 10018
DO NOT WRITE IN THIS SPACE		
		07142005 No Chg-P CP25034 (10/03)
4. FEI Number 22-3716509		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22 STREET, 4TH FLOOR MIAMI, FL 33145		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 if signature required when returning) DATE _____		
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KARNI, GABY 1572 BRIAR OAK DRIVE ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPC DOBRONSKY, ORÉN 1572 BRIAR OAK DRIVE ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 address, with all other like empowered.		
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date _____ Daytime Phone # _____		

50660805





HOTBAR

ATTACHMENT

52060805-
#F04000004797

August 02, 2005

Division of Corporations
PO Box 6198
Tallahassee, FL 32314

To Whom It May Concern:

Please note that we did not receive the notice in the mail that the annual return was due.
As a result, we are now taking majors to complete the return.

Also, please note that all future correspondence should be sent to our corporate
headquarters in New York at the address listed on our letter head.

Thank you.

Sharol Thomas
Controller