2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED **DOCUMENT # F04000005346** 05 SEP 15 AM 10: 46 1. Entity Name I HAMMER, INC. Principal Place of Business Mailing Address 25031 W. AVENUE STANFORD, SUITE 100 1630 S. CHURCH STREET, SUITE 302 VALENCIA, CA 91355 MURFREESBORO, TN 37130 2. Principal Place of Business 3. Mailing Address 25031 W. Avenue Stanford Suite, Apt. #, etc. Suite, Apr. #, etc. CR2E034 (10/03) 06282005 Chg-P 100 Applied For City & State City & State 4. FE! Number Valencia, CA 91355 83-0348276 Not Applicable Ζiρ Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 City Zip Code 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 regulated when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PTD Delete Change XXAddition TITLE VP of Operations TITLE NICGORSKI, MARK NAME Myron Watts NAME STREET ADDRESS 25031 W. AVENUE STANFORD, SUITE 100 STREET ADDRESS 25031 W. Avenue Stanford, Suite 100 CITY-ST-ZIP VALENCIA, CA 91355 CITY-ST-ZIP Valencia, CA 91355 TITLE SDD Delete TITLE Change **600059782386** 09/20/05--01045--002 **150.00 NICGORSKI, MARCUS NAME NAME 25031 W. AVENUE STANFORD, SUITE 100 STREET ADDRESS STREET ADDRESS VALENCIA, CA 91355 CITY-ST-ZIP CHY-ST-ZIF ☐ Change TITLE Defete Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS Offy-ST-ZiP CRY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CIDY-S1-ZIP CDY-S1-ZIP Delete ☐ Change Addition 100.6 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CRY-ST-20P mu Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CRY-SI-782 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 empty effect 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 itrall other like empowered. 6/29/05 (623) 229-3294 Mark Nicgorski, President SIGNATURE: Daytime Phone # NATURE AND TYPED OR PRINTED NAME OF GIGNING OFFICER OR DIRECTOR Date

ATTACHMENT 50066827 FOY000005346

August 23, 2005

DIVISION OF CORPORATIONS PO Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

Enclosed please find the Annual Report for I Hammer, Inc.

Per a phone conversation with one of your representatives, I have not included the late penalty as we never received notification that this was due.

Thank you.

Sincerely,

M. Nicgorski President

Enc.