2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007
Secretary of State

DOCUMENT# F96000000331

Entity Name: CONOVER HOLDINGS, INC.

Current Principal Place of Business:

% NADIA EDWARDS, CPA
290- 174TH ST #815
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

5551 LUCKETT ROAD
FORT MYERS, FL 33905

Current Mailing Address:

% NADIA EDWARDS, CPA
290- 174TH ST #1510
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

5551 LUCKETT ROAD
FORT MYERS, FL 33905

FEI Number: 65-0544199 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDWARDS, NADIA S CPA
290- 174TH ST #815
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

NOTTURNO, KENNETH C
5551 LUCKETT ROAD
FORT MYERS, FL 33905 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: KENNETH C. NOTTURNO 04/02/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DCPS ( ) Delete
Name: HARPAZ, AMIR
Address: 290 - 174TH STREET, SUITE 815
City-St-Zip: SUNNY ISLES, FL 33160

Title: V (X) Delete
Name: EDWARDS, NADIA S
Address: 290 - 174TH STREET, SUITE 815
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MGR (X) Change ( ) Addition
Name: HARP MANAGEMENT, LLC,
Address: 5551 LUCKETT ROAD
City-St-Zip: FORT MYERS, FL 33905

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: AMIR HARPAZ VP 04/02/2007
Electronic Signature of Signing Officer or Director Date