## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## Secretary of State DOCUMENT # F96000002846 08-23-2004 90023 044 \*\*\*558.75 PREFERRED HAWAIIAN, INC. Principal Place of Business Mailing Address 24081007 ONE NORTH CLEMATIS STREET, SUITE 305 ONE NORTH CLEMATIS STREET, SUITE 305 WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 2. Principal Place of Business 3. Mailing Address 2950 REEDY CREEK BLUD 2950 REEDY CREEK BLUD Suite, Apt. #, etc. Suite, Apt. #, etc 08112004 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For KISSIMMEE KISSIMMEE 93-1209218 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired uSA Fee Required usa 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOE ๛ฌ๛ DAVID J. WEIENER, P.A. Address (P.O. Box Number is Not Acceptable) ONE NORTH CLEMATIS STREET, SUITE 305 REEDY CREEK BLUD WEST PALM BEACH, FL 33401 KISSIMMEE 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. \_ONGO\_ CORPORATE CONTROLLER SIGNATURE (NOTE: Registered Agent signature required when reinstating) 550.00 + 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Due by September 8, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD PD TITLE TITLE Change Addition 🔀 Delete GRANT B MCPHAIL KOSEY, A. DAVID NAME NAME GOG CALLE EMBOCADURA STREET ADDRESS ONE NORTH CLEMATIS STREET, SUITE 305 STREET ADDRESS CA 92673 WEST PALM BEACH, FL 33401 CITY-ST-ZIP SAN CLEMENTE CITY-ST-ZIP TITLE VD Delete TITLE 42 Change Addition STEVEN A SINKIN PRESTON, JOHN W.S. NAME NAME 105 WEST WOODLAWN STREET ADDRESS ONE NORTH CLEMATIS STREET, SUITE 305 STREET ADDRESS 78212 CITY-ST-ZIP WEST PALM BEACH, FL 33401 CITY-ST-ZIP SAN ANTONIO TX ☐ Change ☐ Addition TITLE Delete TITLE KOSOY, BRIAN D NAME NAME STREET ADDRESS ONE NORTH CLEMATIS STREET, SUITE 305 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33401 CITY-ST-ZIP ☐ Change ☐ Addition VD **⊠**Delete TITLE TITLE GREEN, ROBERT S NAME NAME STREET ADDRESS ONE NORTH CLEMATIS STREET, SUITE 305 STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition TITLE VST Delete TITLE NAME SHREEVE: DAVID J NAME ONE NORTH CLEMATIS STREET, SUITE 305 STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL 33401 CITY-ST-ZIP CITY-ST-ZIF ☐ Change ■ Addition TITLE ☐ Delete 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 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 accurage 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 of 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 life empowered. changed, or on an attachment

GRANT B MCPHAIR

FILED Aug 23, 2004 8:00 am