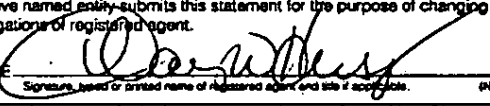
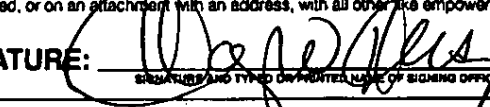


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90186 014 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            |                                                                                                                                                                                                                                       |                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # G54367</b><br>1. Entity Name<br><b>HMHT INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            |                                                                                                                                                      |                                                                              |
| Principal Place of Business<br><b>1501 NORTHPOINT PKWY STE 100</b><br><b>P.O. BOX 21109</b><br><b>WEST PALM BEACH, FL 33416-8109</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Mailing Address<br><b>560 VILLAGE BLVD</b><br><b>335</b><br><b>WEST PALM BEACH, FL 33409</b>                                                                                                                                          |                                                                              |
| 2. Principal Place of Business<br><b>560 VILLAGE BLVD</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                            | 3. Mailing Address<br><b>Suite, Apt. #, etc.</b>                                                                                                                                                                                      |                                                                              |
| Suite, Apt. #, etc.<br><b># 335</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            | Suite, Apt. #, etc.                                                                                                                                                                                                                   |                                                                              |
| City & State<br><b>West Palm Beach, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                            | City & State                                                                                                                                                                                                                          |                                                                              |
| Zip<br><b>FL 33409</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                            | Zip                                                                                                                                                                                                                                   |                                                                              |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                            | Country                                                                                                                                                                                                                               |                                                                              |
| 4. FEI Number<br><b>86-0450254</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                            | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                                                |                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                            | <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                 |                                                                              |
| 6. Name and Address of Current Registered Agent<br><b>HERSEY, HARRY</b><br><b>1501 NORTHPOINT PKWY</b><br><b>SUITE 100</b><br><b>W PALM BEACH, FL 33407</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                            | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                                              |
| 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.<br>SIGNATURE:  (NOTE: Registered Agent signature required when re-registering)<br>DATE: <b>2/15/05</b>                                                                                                                                                                                                                            |                                            |                                                                                                                                                                                                                                       |                                                                              |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2005 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                            | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>                                                                                                                   |                                                                              |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                            | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                                 |                                                                              |
| TITLE<br><b>P</b><br>NAME<br><b>HERSEY, HARRY W.</b><br>STREET ADDRESS<br><b>1501 NORTHPOINT PKWY 100</b><br>CITY-ST-ZIP<br><b>W PALM BCH., FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete            | TITLE<br><b>P</b><br>NAME<br><b>HERSEY, HARRY W.</b><br>STREET ADDRESS<br><b>560 VILLAGE BLVD #335</b><br>CITY-ST-ZIP<br><b>West Palm Beach, FL 33409</b>                                                                             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br><b>S</b><br>NAME<br><b>STOCKDILL, BETSY</b><br>STREET ADDRESS<br><b>1501 NORTHPOINT PKWY 100</b><br>CITY-ST-ZIP<br><b>W. PALM BEACH, FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Delete | TITLE<br><br>NAME<br><br>STREET ADDRESS<br><br>CITY-ST-ZIP<br>                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br><br>NAME<br><br>STREET ADDRESS<br><br>CITY-ST-ZIP<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete            | TITLE<br><br>NAME<br><br>STREET ADDRESS<br><br>CITY-ST-ZIP<br>                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br><br>NAME<br><br>STREET ADDRESS<br><br>CITY-ST-ZIP<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete            | TITLE<br><br>NAME<br><br>STREET ADDRESS<br><br>CITY-ST-ZIP<br>                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br><br>NAME<br><br>STREET ADDRESS<br><br>CITY-ST-ZIP<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete            | TITLE<br><br>NAME<br><br>STREET ADDRESS<br><br>CITY-ST-ZIP<br>                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 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 executor 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                            | DATE: <b>2/15/05</b>                                                                                                                                                                                                                  |                                                                              |

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02152005 Chg-P CR2E034 (10/03)