2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2008 08:00 Al Secretary of State DOCUMENT # M01596 1. Entity/Name HYDREST, INC. Principal Place of Business Mailing Address 3900 BRAGANZA AVE. 3900 BRAGANZA AV MIAMI, FL 33133 MIAMI, FL 33133 04012008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2596779 Not Applicable \$8.75 Additional 5. Certificate of Status Desired و ک Fee Required 6. Name and Address of Current Registered Agent VAN DE KREEKE, JACOBUS DO NOT WRITE 3900 BRAGANZA AVE. MIAMI, FL 33133 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 signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TIT! F NAME VAN DE KREEKE, JACOBUS STREET ADDRESS 3904 BRAGANZA AVENUE CITY-ST-ZIP MIAMI, FL 33133 TITLE NAME LEATHERS, NORMAN H. STREET ADDRESS 2541 TIGERTAIL AVENUE CITY-ST-ZIP MIAMI, FL 33133 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-7IP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

VAN DE KREEKE