## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# M45496

FILED Feb 21, 2008 Secretary of State

Entity Name: H.M. MIST CO., INC.	
Current Principal Place of Business:	New Principal Place of Business:
3646 23RD AVE S 107 LAKE WORTH, FL 33461 US	
Current Mailing Address:	New Mailing Address:
3646 23RD AVE S 107 LAKE WORTH, FL 33461 US	
FEI Number: 65-0000919 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	
BECK, MICHAEL M 123 LAKESHORE PH44 NORTH PALM BEACH, FL 33408 US	
The above named entity submits this statement for t in the State of Florida.	he purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered	Agent Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P () Delete  Name: BECK, MICHAEL M  Address: 123 LAKESHORE DR., #PH44  City-St-Zip: NORTH PALM BEACH, FL 33408	Title: P (X) Change ( ) Addition Name: BECK, STEVEN M Address: 304 ANDOVER CT City-St-Zip: BOYNTON BEACH, FL 33436

Title: P () Delete Title: P (X) Change () Addition
Name: BECK, MICHAEL M
Address: 123 LAKESHORE DR., #PH44 Address: 304 ANDOVER CT
City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: BOYNTON BEACH, FL 33436

Title: ST () Delete Title: () Change () Addition
Name: BECK, HARRYETTE L
Address: 123 LAKESHORE DR., #PH44 Address:

Address: 123 LAKESHORE DR., #PH44 Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip:

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name: BECK, STEVEN M Name: BECK, MICHAEL M

Address: 1955 ST. ANDREWS DRIVE Address: 123 LAKESHORE DR., #PH44
City-St-Zip: PALM CITY, FL 34990 City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify 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: STEVE BECK P 02/21/2008