


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008 08:00 AM
Secretary of State

DOCUMENT # M72836
 1. Entity Name
HAYZAK TECHNOLOGY, INC.



Principal Place of Business Mailing Address
10 NW 2ND ST **PO BOX 1376**
HIGH SPRINGS, FL 32643 . US **ALACHUA, FL 32616**

DO NOT WRITE IN THIS SPACE



01172008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
59-2878424 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

STARK, CHARLES F.
11718 NW 157 ST
ALACHUA, FL 32615

DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating)
Signature: typed or printed name of registered agent and title if applicable. DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STARK, CHARLES F. 11718 NW 157ST ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STARK, DEBORAH M. 11718 NW 157ST ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNSON, CHAD 15704 NW 118 PL. ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHNSON, VIRGINIA 15704 NW 118 PL. ALACHUA, FL 32615
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/24/08-80009-001 150.00

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.

SIGNATURE: Charles F. Stark 1/17/08 386-454-3966
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Charles F. Stark