2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M89842

1. Entity Name

GONZALEZ HEYDRICH DESIGN, INC.



FILED Jan 09, 2008 08:00 AN Secretary of State

Principal Place of Business

1516 E. HILLCREST STREET

SUITE 100

ORLANDO, FL 32803

Mailing Address

1516 E. HILLCREST STREET

SUITE 100

ORLANDO, FL 32803



DO NOT WRITE IN THIS SPACE

 01072008
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number
 Applied For S9-2903061

 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, HUBERT A. 1516 E. HILLCREST STREET SUITE 100 ORLANDO, FL 32803

DO NOT WRITE IN THIS SPACE

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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) 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	000000776917 01/09/08-80044-003	150.00
10.	OFFICERS AND DIRECTORS					
TITLE	PTS					j
NAME	GONZALEZ, HUBERT A.		1			
STREET ADDRESS	1516 E. HILLCREST STREET					
CITY-ST-ZIP	ORLANDO, FL					
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TITLE			1			

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:

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

IGNATURE AND TYPED OR PRINTED MAJE OF SIGNING OFFICER OR DIRECTOR

12/3/1/51

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