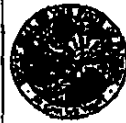


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 09, 2007 08:00 AM
Secretary of State

DOCUMENT # P00000019819

1. Entity Name
G. HANNA ENTERPRISE, INC.



Principal Place of Business
**5689 WILLINGTON CT
PALM HARBOR, FL 34685**

Mailing Address
**5689 WILLINGTON CT
PALM HARBOR, FL 34685**

DO NOT WRITE IN THIS SPACE

03302007 No Chg-P CR2E034 (11/06)

4. FEI Number
59-3625582

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HANNA, JASON
5689 WILLINGTON CT
PALM HARBOR, FL 34685**

**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 _____

Signature, typed or printed name of registered agent are all applicable.

(NOTE: Registered Agent Signature Required when rendering)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000763391
05/30/07-80008-001 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HANNA, JASON
STREET ADDRESS	5689 WILLINGTON CT
CITY - ST - ZIP	PALM HARBOR, FL 34685
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 807, 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: *Jason Hanna*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-07 (813) 3674821

Date

Daytime Phone #