

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000020317

Entity Name: IHEADHUNT.CC, INC.

FILED  
Apr 24, 2008  
Secretary of State

## Current Principal Place of Business:

200 S CENTRAL AVE  
SUITE 3000  
OVIEDO, FL 32765 US

## New Principal Place of Business:

## Current Mailing Address:

23 ALAFAYA WOODS BLVD.  
# 196  
OVIEDO, FL 32765 US

## New Mailing Address:

FEI Number: 59-3632685      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SIEG, CHRISTIAN  
8663 GLYBORNE CT.  
ORLANDO, FL 32825 US

## Name and Address of New Registered Agent:

SIEG, CHRISTIAN  
23 ALAFAYA WOODS BLVD  
196  
OVIEDO, FL 32765 US

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.

SIGNATURE: CHRISTIAN SIEG

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FERRELL, JAMES W  
Address: 1400 W FAIRBANKS AVE STE 102  
City-St-Zip: WINTER PARK, FL 32789

Title: ST ( ) Delete  
Name: SIEG, CHRISTIAN M  
Address: 8663 GLYBORNE CT.  
City-St-Zip: ORLANDO, FL 32825

Title: VP ( ) Delete  
Name: MITCHELL, JAMES  
Address: 137 MOSES CREEK BLVD.  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: P ( ) Delete  
Name: LOFGREN, PETER J  
Address: 1119 TROTWOOD BLVD  
City-St-Zip: WINTER SPRINGS, FL 32708

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: SIEG, CHRISTIAN M  
Address: 23 ALAFAYA WOODS BLVD #196  
City-St-Zip: OVIEDO, FL 32765

Title: VP (X) Change ( ) Addition  
Name: MITCHELL, JAMES  
Address: 23 ALAFAYA WOODS BLVD #196  
City-St-Zip: OVIEDO, FL 32765

Title: P (X) Change ( ) Addition  
Name: LOFGREN, PETER J  
Address: 23 ALAFAYA WOODS BLVD #196  
City-St-Zip: OVIEDO, FL 32765

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: PETER LOFGREN

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date