2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2003
Secretary of State

DOCUMENT# P00000032687

Entity Name: HARVEST INVESTMENTS INC.

Current Principal Place of Business:

2335 COCONUT LN.
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

2335 COCONUT LN.
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 59-3640749 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONNELLY, DENNIS P
2335 COCONUT LN.
MERRITT ISLAND, FL 32952

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	TRES	( ) Delete
Name:	CONNELLY, DENNIS P	
Address:	2335 COCONUT LANE	
City-St-Zip:	MERIRITT ISLAND, FL 32952 BR	
Title:	PRES	( ) Delete
Name:	CONNELLY, DENNIS P	
Address:	2335 COCONUT LANE	
City-St-Zip:	MERRITT ISLAND, FL 32952 BR	
Title:	VICE	( ) Delete
Name:	CONNELLY, DELIGHT	
Address:	2335 COCONUT LANE	
City-St-Zip:	MERRITT ISLAND, FL 32952 BR	
Title:	SECT	( ) Delete
Name:	CONNELLY, DENNIS P	
Address:	2335 COCONUT LANE	
City-St-Zip:	MERRITT ISLAND, FL 32952 BR	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DENNIS P. CONNELLY PRES 02/20/2003

Electronic Signature of Signing Officer or Director — Date