2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2005
Secretary of State

DOCUMENT# P00000039121

Entity Name: HSEE INC.

Current Principal Place of Business:

3001 ALOMA AVENUE
SUITE 121
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

3001 ALOMA AVENUE
SUITE 121
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-3639983 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FERNANDES, MARK
1990 NE 163RD ST SUITE 108
NORTH MIAMI BEACH, FL 33162 US

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: CPTD ( ) Delete
Name: LORINS, PETERSON
Address: 3001 ALOMA AVENUE, SUITE 121
City-St-Zip: WINTER PARK, FL 32792

Title: VS ( ) Delete
Name: RUSS, ARLENE S
Address: 425 SOUTH PLATT RD.
City-St-Zip: MILAN, MI 48160

Title: V ( ) Delete
Name: PIERRE, PATRICK
Address: 1372 S. HIAWASSEE RD., #169
City-St-Zip: ORLANDO, FL 32835

Title: V ( ) Delete
Name: TRINH, VIET
Address: 3001 ALOMA AVENUE, SUITE 121
City-St-Zip: WINTER PARK, FL 32792

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: PETERSON LORINS CPTD 03/26/2005

Electronic Signature of Signing Officer or Director — Date