

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000066159

Entity Name: HATS BY RODENA, INC.

FILED
Apr 29, 2004
Secretary of State

Current Principal Place of Business:

158 COVENTRY PLACE
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

Current Mailing Address:

158 COVENTRY PLACE
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

FEI Number: 65-1024060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, GONZALES B
158 COVENTRY PLACE
PALM BEACH GARDENS, FL 33418

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: PD () Delete
Name: JOHNSON, ANITA L
Address: 158 COVENTRY PLACE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: VD () Delete
Name: JOHNSON, GONZALES B
Address: 158 COVENTRY PLACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: SD () Delete
Name: JOHNSON, GLENDA B
Address: 14931 SW 82 LANE APT 506
City-St-Zip: MIAMI, FL 33193 US

Title: D () Delete
Name: JOHNSON, GARY B
Address: 1800 W. HILCREST DRIVE
City-St-Zip: NEWBURY PARK, CA 91320 US

Title: D () Delete
Name: JOHNSON, STACI B
Address: 1800 W. HILCREST DRIVE
City-St-Zip: NEWBURY PARK, CA 91320

Title: D () Delete
Name: SMALL, KATRINA W
Address: 5840 SUNDOWN CIRCLE, TUSCANY BAY APT #308
City-St-Zip: ORLANDO, FL 32822

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:

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: ANITA L. JOHNSON

PD

04/29/2004

Electronic Signature of Signing Officer or Director

Date