2007 FOR PROFIT CORPORATION ANNUAL REPORT

Sep 13, 2007 8:00 am Secretary of State DOCUMENT # P01000014094 09-13-2007 90002 005 ***158.75 1. Entity Name NHRC SERVICES CORP. Principal Place of Business Mailing Address PUUNTOOD 1722 AVENIDA DEL SOL 1722 AVENIDA DEL SOL BOCA RATON, FL 33432 BOCA RATON, FL 33432 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06152007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 65-1071606 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHRIBERG, KEN 1722 AVENIDA DEL SOL Street Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33432 Zip Code City FL 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 and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 14, 2007 Added to Fees corporation did not receive the prior notice 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PD ☐ Delete TITLE Change ☐ Addition NAME SHRIBERG, KEN NAME STREET ADDRESS 1722 ANVENIDA DEL SO STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 CITY-ST-ZIP VP ☐ Delete ☐ Change ■ Addition TITLE TITLE WEINTARTEN, YIZI NAME NAME STREET ADDRESS 10825 ROYAL PALM BVD., APT 7 STREET ADDRESS CITY-ST-ZIP CORAL SPRINGS, FL 33065 CITY-ST-ZIP TIDE ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TEE: F ☐ Delete TiTLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IE CITY-ST-7IP ☐ Change TIDE ☐ Addition ☐ Delete TITLE NAME

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 607, 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

NAME

STREET ADDRESS

CITY-ST-7/P

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NG OFFICER OR DIRECTOR ID TYPED OR PRINTED NAME OF SIGN

9/11/07

561350402 Daytime Phone #

FILED



June 15, 2007

Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Re. 2007 For Profit Corporation Report

Please be advised that we did not receive the Annual Report Notice to file for the 2007 For Profit Corporation Annual Report. We were not aware of the due date of May 1st.

We are enclosing the report with a check for the fees.

You can contact me at 561-353-4444 ext. 21, if additional information is needed.

Sincerely,

Ken Shriberg

President/Founder