2004 FOR PROFIT CORPORATION

FILED Apr 19, 2004 8:00 am Secretary of State

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DOCUMENT # P01000044258 HOURGLASS INVESTMENTS, INC. Principal Place of Business Mailing Address 94054224 245 VENUS ST., #4 245 VENUS ST., #4 JUPITER, FL 33458 JUPITER, FL 33458 2. Principal Place of Business 3. Mailing Address 3112 JUPITER PARK CIRCLE <u>3112 JUPITER PARK CIRCLE</u> Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 02192004 CR2E034 (10/03) SUITE 1 SUITE 1 City & State 4. EEI Number Applied For City & State JUPITER 65-1098178 Not Applicable JUPITER Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired 33458 USA 33458 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FAUCHER, STEVEN Street Address (P.O. Box Number is Not Acceptable) 245 VENUS ST., #4 3112 JUPITER PARK CIRCLE JUPITER, FL 33458 SUITE 1 JUPITER 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Delete TITLE TITLE Change ☐ Addition NAME FAUCHER, STEVEN NAME STREET ADDRESS 19 BUNKER PLACE STREET ADDRESS CITY-ST-ZIP TEQUESTA, FL 33469 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME GROGAN, MICHAEL NAME 4114 CATALPHA AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM BEACH GARDENS, FL. 33410 CITY-ST-ZIP 🚅 TITLE ☐ Delete TITLE ☐ 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 ☐ Delete Change ☐ Addition TITLE TITLE 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 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppliemental proport is true and accurate and that my signarure shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of 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 properties. SIGNATURE: