

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # P01000088859

1. Entity Name
HATBERT HOLDINGS, INC.



Principal Place of Business
**4075 S.W. 83RD AVE.
MIAMI, FL 33155**

Mailing Address
**4075 S.W. 83RD AVE.
MIAMI, FL 33155**



04272007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
38-3675807

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DIAZ-PADRON, JUAN
4075 S.W. 83RD AVE.
MIAMI, FL 33155**

**DO NOT WRITE
IN THIS SPACE**

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 re-nominating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000747579
05/17/07-80031-007 158.75

10. OFFICERS AND DIRECTORS

TITLE P/D
NAME DIAZ-PADRON, JUAN
STREET ADDRESS 1528 CANTORIA AVE
CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE S/D
NAME DIAZ-PADRON, CARMEN
STREET ADDRESS 1410 ROBBIA
CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE D
NAME ARIAS, RAMON H
STREET ADDRESS 7665 S.W. 171 ST.
CITY-ST-ZIP PALMETTO BAY, FL 33157

TITLE D
NAME PARJUS, ALBERTO N
STREET ADDRESS 16567 S.W. 67TH TERR.
CITY-ST-ZIP MIAMI, FL 33193

TITLE D
NAME SIERRA, ANTHONY F
STREET ADDRESS 1320 SOUTH DIXIE HIGHWAY, 6TH FLOOR
CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Juan Diaz Padron

4-27-07 305-554-0357