2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000116777

Entity Name: DONNA HAVER INC

FILED Jun 25, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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13806 155TH PLACE NORTH 8461 LAKE WORTH ROAD JUPITER, FL 33478

SUITE 170

LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

13806 155TH PLACE NORTH 8461 LAKE WORTH ROAD JUPITER, FL 33478 SUITE 170

LAKE WORTH, FL 33467

FEI Number: 65-1157519 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAVER, DONNA THEODULE, GEORGE 13806 155TH PLACE NORTH 8461 LAKE WORTH ROAD JUPITER, FL 33478 SUITE 170 LAKE WORTH, FL 33467 US

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: GEORGE THEODULE 06/25/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

HAVER, DONNA HAVER, DONNA Name: Name:

13806 155TH PLACE NORTH 8461 LAKE WORTH ROAD, SUITE 170 Address: Address:

City-St-Zip: JUPITER, FL 33478 City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete Title: () Change (X) Addition

Name: Name: THEODULE, GEORGE

8461 LAKE WORTH ROAD, SUITE 170 Address: Address:

LAKE WORTH, FL 33467 City-St-Zip: City-St-Zip:

Title: () Change (X) Addition Title: () Delete

GERMAN, CARDONA Name: Name:

8461 LAKE WORTH ROAD, SUITE 170 Address Address: City-St-Zip: City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete Title: () Change (X) Addition DELISFORT, DOROTHY Name: Name:

Address: Address: 8461 LAKE WORTH ROAD, SUITE 170

City-St-Zip: City-St-Zip: LAKE WORTH, FL 33467

Title: Title: () Change (X) Addition () Delete

WILLIAMS, YOLETTE T Name: Name:

Address: Address: 1500 NORTH UNIVERSITY DRIVE, SUITE 245

City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DONNA HAVER Ρ 06/25/2008