2008 FOR PROFIT CORPORATION

Apr 10, 2008 08:00 A Secretary of State ANNUAL REPORT **DOCUMENT # P02000046769** HORSTMANN ENTERPRISES, INC. Principal Place of Business Mailing Address 13604 RUDI LOOP 13604 RUDI LOOP SPRING HILL, FL 34609 SPRING HILL, FL 34609 03312008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0440550 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRI HORSTMANN, GARY 13604 RUDI LOOP IN THIS SPACE SPRING HILL, FL 34609 and the same 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, 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 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS THE HORSTMANN, GARY NAME 13604 RUDI LOOP STREET ADDRESS CITY-ST-ZIP SPRING HILL, FL 34609 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WR CITY-ST-ZIP TITLE IN THIS SPAC NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

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:

STREET ADDRESS CiTY-ST-ZIP

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED