2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 10, 2006 8:00 am Secretary of State DOCUMENT # P02000086075 04-10-2006 90294 017 ***150.00 1. Entity Name HJ HOLDING CORP. Principal Place of Business Mailing Address **6002000** 8275 NW 80TH STREET 8275 NW 80TH STREET MIAMI, FL 33166 MIAMI, FL 33166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc CR2E034 (11/05) 02022006 Chg-P City & State City & State 4. FEI Number Applied For 52-2370573 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 Richard E. Schatz HICKEY, EDWIN W Street Address (P.O. Box Number is Not Acceptable) c/o Stearns Weaver Miller Weissler Alhadeff 8275 NW 80TH STREET MIAMI, FL 33166 150 West Flagler Street City Zip Cod 130 Miami or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept The above named entity submits th the obligations of registered ager SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN-11-11. TITLE ☐ Delete Addition TITLE Change | HICKEY, EDWIN W NAME STREET ADDRESS 8275 NW 80TH STREET STREET ADDRESS MIAMI, FL 33166 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition Pelete JOHNSON, ROBERT A NAME NAME 8510 NW 68 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Delete ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-70P ☐ Addition ☐ Delete TITLE ☐ Change TITLE 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 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.

Edwin W. Hickey

OF SIGNING OFFICER OR DIRECTO

2/24/06

FILED