

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2008 8:00 am**  
**Secretary of State**

04-24-2008 90113 043 \*\*\*150.00

<b>DOCUMENT # P02000094782</b>						
<b>1. Entity Name</b> RISING SON INVESTMENTS, INC.						
<b>Principal Place of Business</b> 2010 3RD STREET NEPTUNE BEACH, FL 32266			<b>Mailing Address</b> 416 3RD STREET JACKSONVILLE BEACH, FL 32250			
<b>2. Principal Place of Business - No P.O. Box #</b> 416 3rd. St. S. Suite, Apt. #, etc. Suite #1 City & State Jacksonville Beach, FL Zip 32250 Country USA		<b>3. Mailing Address</b> 416 3rd. St. S. Suite, Apt. #, etc. Suite #1 City & State Jacksonville Beach, FL Zip 32250 Country USA				
<b>4. FEI Number</b> 43-1990108		<b>Applied For</b> <input type="checkbox"/> Not Applicable				
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>				
<b>6. Name and Address of Current Registered Agent</b> MANGANI, MICHAEL F 2010 3RD STREET NEPTUNE BEACH, FL 32266			<b>7. Name and Address of New Registered Agent</b> Name Jeffrey D. Klotz Street Address (P.O. Box Number is Not Acceptable) 416 Third St. S. Suite #1 City Jacksonville Beach FL Zip Code 32250			
<b>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.</b> SIGNATURE:  DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent's signature required when registering.</small>						
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>				
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
<b>TITLE</b> D	<b>NAME</b> MANGANI, MICHAEL F		<input checked="" type="checkbox"/> Delete	<b>TITLE</b> Alan Dickinson	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 2010 3RD STREET	<b>CITY-ST-ZIP</b> NEPTUNE BEACH, FL 32266			<b>STREET ADDRESS</b> 416 S. 3rd St.	<b>CITY-ST-ZIP</b> Jacksonville Beach, FL 32250	
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP	
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP	
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP	
<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP		<input type="checkbox"/> Delete	<b>TITLE</b> NAME	<b>STREET ADDRESS</b> CITY-ST-ZIP	
<b>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.</b>						
<b>SIGNATURE:</b>			Jeff D. Klotz 04/18/08			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>			

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