2005 FOR PROFIT CORPORATION ANNUAL-REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 29, 2005 08:00 AM Secretary of State DOCUMENT # P03000008261 1. Entity Name C.J. HASON ENTERPRISES, INC. Principal Place of Business Mailing Address 2336 S. EAST OCEAN BLVD. #317 2336 S. EAST OCEAN BLVD. #317 STUART, FL 34996 STUART, FL 34996 No Chg-P CR2E034 (10/03) 04272005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 05-0551265 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SAUCEDO, JOSE DO NOT WRITE 3884 SE FAIRWAY EAT STUART, FL 34997 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 reinstating) DATE U00000341670 04/29/05-80024-019 158.75 \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE SAUCEDO, JOSE NAME STREET ADDRESS 3884 SE FAIRWAY EAT CITY-ST-ZIP STUART, FL 34997 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true-land 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 reserver or fustee 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.

FILED

Daytime Phone #