2004 FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT # P03000133500**

FILED Apr 26, 2004 8:00 am Secretary of State

1. Entity Name HAGER HARDWOODS, INC.				04-12-2004 90260 011 ***150.00			
Principal Place of Business Mailing Address 1521 NE 63RD COURT 1521 NE 63RD COURT FT. LAUDERDALE, FL 33334 FT. LAUDERDALE, FL 33			34		114783 , ====================================	F&	
2. Principal Place of Business 3. Mailing Address				0 - , , ,	, -, -, - <u>-</u> , -, -, -, -, -, -, -, -, -, -, -, -, -,	, E di	
Suite, Apt. #, etc. Suit		Suite, Apt. #, etc.		04042004 Chg-P	CR2E034 (10/03		
City & State		City & State		4. FEI Number 76 07	45255	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desire	SB.75 A		
	5. Name and Address of Current I	lagistered Agent		7. Name and Address of No	rer Registered Agent		
HAGER, GREGORY W 1521 NE 63RD COURT			Name Street Address	Street Address (P.O. Box Number is Not Acceptable)			
FT-LAUDE	RDALE, FL=33334	<u>ئىي ، ئەنىستىيەتلىرىنى بارتىت يېچىپ ھەستە</u> ب					
•		City	FL Zip Code				
8. The above the obligati	named entity submits this statement for ons of registered agent.	the purpose of changing its reg	istered office or regis	tered agant, or both, in the State	of Florida. I am femilier wi	th, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE Re	gistered Agent signature requi	red when ministating)	DATE		
FILI After Ma	E NOW!!! FEE IS \$150.00 by 1, 2004 Fee will be \$550.0	9. Election Campaign Trust Fund Contribu		5.00 May Be dded to Fees			
10.	OFFICERS AND	DIRECTORS .	11.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTO	DRS IN 11	
TITLE NAME STREET ADDRESS	D HAGER, GREGORY W 1521 NE 63RD COURT	□ Delete	TITLE NAME STREET ADDRESS	<i>-</i> .	☐ Chang	e Addition	
-CITY-ST-20	FT: LAUDERDALE, FL 33334-		-CITY-SI-ZIP	جمو _ت ہے ہے			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		(□ Chang	je 🛄 Addition	
, TITLE NAME STREET ADDRESS	· _ <u>-</u>	☐ Dalete	TITLE NAME STREET ADDRESS	ىلىك دارى دىك د	☐ Chang	e Addition	
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Celete	CITY-SI-ZIP		. Chang	ne 🗆 Addition	
NAME STREET ADDRESS CITY-ST-ZIP		_ Output	NAME STREET ADDRESS CITY-ST-ZIP	الفاحة فسنتسبب بالبائية			
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	24-	☐ Chan	ge Addition	
TITLE MAKE		Deleta Deleta	CITY-ST-ZIP		Chan	ge Addition ag	
STREET ADDRESS CITY-ST-ZIP	Certify that the information sumplied will	this filing closs not quality for th	STREET ADDRESS CITY-ST-ZIP ne exemption stated in	Section 119.07(3Yi). Florida State	utes. I further certify that the	ne Information	
indicated of the co changed	certify that the information supplied will I on this report or supplemental report is provided to the receiver or trustee emp , or on an attachment with an address,	s true and accurate and that my owered to execute this report as with all other like empowered.	signature shall have to required by Chapter	he same legal effect as if made u 607, Florida Statutes; and that my	nder oath; that I am an offi name appears in Block 1	cer or director 0 or Block 11 if	
SIGNAT	TURE: SIGNATURE AND TO BE OR	PRENTED HABIE OF SIGNING OFFICER OR	DRECTOR	성- a Cene	04 954-48 Deyllas Pron	9-0608	