ZUUS FUR PROFIT CURPURATION ANNUAL REPORT

DOCUMENT # P03000148774 FILED Mar 05, 2005 08:00 AM Secretary of State 1. Entity Name 1 HATCHER SUPPLY CO., INC. - Mailing Address Principal Place of Business . 709 SILVER PALM AVE STE I 709 SILVER PALM AVE STE I MELBOURNE, FL 32901 MELBOURNE, FL 32901 03032005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3784022 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE HATCHER, DAVID C -6045 US HWY 1 **GRANT, FL 32949** 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed same of registered agent and little if applicable. 11000000252274 9. Election Campaign Financing \$5.00 May Be 03/05/05-80020-008 150.00 FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE HATCHER, DAVID C NAME STREET ADDRESS 6045 US HWY 1 CITY-ST-ZIP GRANT, FL 32949 TITLE NAME STREET ADDRESS CITY-ST-7IP महा ह NAME STREET ADDRESS DO NOT WRITE City-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(1), 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 logal effect as if made under eath; that I am an efficier 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

321-729-6761