

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039963

Entity Name: HIT SALES & MARKETING, INC.

FILED
Apr 08, 2006
Secretary of State

Current Principal Place of Business:

18470 US HWY 41 N
LUTZ, FL 33549 US

New Principal Place of Business:

Current Mailing Address:

18470 US HWY 41 N
LUTZ, FL 33549 US

New Mailing Address:

FEI Number: 20-0980538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IACHINI, CHERYL
15424 N. NEBRASKA AVE
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

ELLIOTT, CINDY
18470 US HWY 41 N
LUTZ, FL 33549 US

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.

SIGNATURE: CINDY ELLIOTT

04/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAWKINS, LISA
Address: 15424 N. NEBRASKA AVE
City-St-Zip: LUTZ, FL 33549 US

Title: VP () Delete
Name: IACHINI, CHERYL
Address: 15424 N. NEBRASKA AVE
City-St-Zip: LUTZ, FL 33549

Title: S (X) Delete
Name: TROUT, SUZANNE
Address: 15424 N. NEBRASKA AVE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: HAWKINS, LISA
Address: 18470 US HWY 41 N
City-St-Zip: LUTZ, FL 33549 US

Title: VP/T (X) Change () Addition
Name: TROUT, SUZANNE
Address: 18470 US HWY 41 N
City-St-Zip: LUTZ, FL 33549

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUZANNE TROUT

VP/T

04/08/2006

Electronic Signature of Signing Officer or Director

Date