2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000067784

Entity Name: HOOD INTERNATIONAL STREET WEAR INC.

FILED Apr 27, 2008 Secretary of State

Current Principal Place of Business: 6120 PAINTED LEAF LANE NAPLES, FL 34116			New Princ	New Principal Place of Business:		
Current Mailing Address:			New Maili	New Mailing Address:		
6120 PAIN ⁻ NAPLES, F	TED LEAF LANE L 34116					
FEI Number Applied For ()		FEI Number Not Appl	icable (X) Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name a				Address of New Registered Agent:		
NAPLES, F	FED LEAF LANE L 34116 US					
The above in the State		ts this statement for the pu	ırpose of changing i	ts registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electronic Sig	nature of Registered Ager	nt	Date		
Election Carr	paign Financing Trust	Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () Delete TURNER, DIANA L 6120 PAINTED LEAF NAPLES, FL 34116		Title: Name: Address: City-St-Zip:	P (X) Change () Addition TURNER, BRIAN S PRES 5465 STABLE WAY NAPLES, FL 34114 US		
Title: Name: Address: City-St-Zip:	()Delete	•	Title: Name: Address: City-St-Zip:	D () Change (X) Addition HIPWELL, JEFF DIRECTO 935 N. WATERFORD DRIVE, #202 NAPLES, FL 34104 US		
Title: Name: Address: City-St-Zip:	()Delete		Title: Name: Address: City-St-Zip:	D () Change (X) Addition MILLER, MARCUS J DIRECTO 5465 STABLE WAY NAPLES, FL 34114 US		
Title: Name: Address: City-St-Zip:	()Delete	•	Title: Name: Address: City-St-Zip:	D () Change (X) Addition GARRETT, SEAN B DIRECTO 5465 STABLE WAY NAPLES, FL 34114 US		
Title: Name: Address: City-St-Zip:	()Delete	•	Title: Name: Address: City-St-Zip:	S () Change (X) Addition TURNER, DIANA SEC 6120 PAINTED LEAF LANE NAPLES, FL 34116 US		

I hereby certify that the information supplied with this filing does not qualify 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: DIANA L. TURNER SEC 04/27/2008