2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0400089612

Entity Name
 HIGH CURIOSITY, INC.



FILED Aug 28, 2007 08:00 AM Secretary of State

Principal Place of Business

378 A TEQUESTA DRIVE JUPITER, FL 33469 Mailing Address

378 A TEQUESTA DRIVE JUPITER, FL 33469



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07092007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1267550

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STEIN, ROBERT E 39 OAKLAND COURT TEQUESTA, FL 33469

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8. The above the obligat	named entity submits this statement for the lions of registered agent.	e purpose of changing its	register	ed office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register				d Agent signature	required when reinstating)	DATE
	LE NOW!!! FEE IS \$150.00 ue by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. S5.00 May Be Added to Fees				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIE	RECTORS	$\neg r$	T	·	
TITLE	P			1		
NAME	STEIN, ROBERT E					
STREET ADDRESS	39 OAKLAND COURT			ł		

CITY-ST-ZIP TEQUESTA, FL 33469 TITLE STEIN, ROBERT E NAME STREET ADDRESS 39 OAKLAND COURT CITY-ST-ZIP TEQUESTA, FL 33469 TOTLE STEIN, ROBERT E NAME STREET ADDRESS 39 OAKLAND COURT CITY-ST-ZIP TEQUESTA, FL 33469 TITLE STEIN, ROBERT E NAME STREET ADDRESS 39 OAKLAND COURT CITY-ST-ZIP TEQUESTA, FL 33469 TITLE NAME STREET ADDRESS CITY-ST-ZIP

U00000772804 08/28/07-80004-015 150.00

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12. I hereby certify that the information supplied with this liling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and 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 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:

TITLE NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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