

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000105936

FILED
Jan 30, 2005
Secretary of State

Entity Name: FRIENDLY HOBBY PRODUCTS INC

Current Principal Place of Business:

6901 OKEECHOBEE BVD
D7
WEST PALM BEACH, FL 33411 US

Current Mailing Address:

6901 OKEECHOBEE BVD
D7
WEST PALM BEACH, FL 33411 US

FEI Number: 90-0188735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCVAY, DOUG
619 N DIXIE HIGHWAY
WEST PALM BEACH, FL 33460 US

New Principal Place of Business:

6917 VISTA PARKWAY NORTH
UNIT 17
WEST PALM BEACH, FL 33411 US

New Mailing Address:

6917 VISTA PARKWAY NORTH
UNIT 17
WEST PALM BEACH, FL 33411 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HATZFELD, THEODORE S
Address: 6901 OKEECHOBEE BLVD D7
City-St-Zip: WEST PALM BEACH, FL 33411 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HATZFELD, THEODORE S
Address: 3172 NORTH JOG ROAD APT 8105
City-St-Zip: WEST PALM BEACH, FL 33411 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THEODORE S HATZFELD

P

01/30/2005

Electronic Signature of Signing Officer or Director

Date