



**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000094840			
1. Entity Name SOUTHERN HAND SETS INC			
Principal Place of Business 209 MOCCASIN HOLLOW RD LITHIA, FL 33547		Mailing Address 209 MOCCASIN HOLLOW RD LITHIA, FL 33547	
DO NOT WRITE IN THIS SPACE			
		01092007 No Chg-P CR2E034 (11/05)	
		4. FEI Number 20-3112946	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
GREEN, GARY 209 MOCCASIN HOLLOW RD LITHIA, FL 33547		DO NOT WRITE 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) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000609926 02/01/07-80069-020 150.00
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GREEN, GARY 209 MOCCASIN HOLLOW RD LITHIA, FL 33547		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST GREEN, KIMBERLY 209 MOCCASIN HOLLOW RD LITHIA, FL 33547		
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DO NOT WRITE IN THIS SPACE			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 <u>Kimberly Green</u> <u>Kimberly Green</u>		1/27/07 813-323-3914	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	