


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jul 16, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000149234	
1. Entity Name ALOHA PROMOTIONALS, INC.	

Principal Place of Business 435 ISLAND OAKS PLACE MERRITT ISLAND, FL 32953 US	Mailing Address 435 ISLAND OAKS PLACE MERRITT ISLAND, FL 32953 US
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07092007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3376154	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
DENSON, JENNIFER 435 ISLAND OAKS PLACE MERRITT ISLAND, FL 32953	

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 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DENSON, JENNIFER 435 ISLAND OAKS PLACE MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TRE DENSON, JENNIFER 435 ISLAND OAKS PLACE MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DENSON, TROY 435 ISLAND OAKS PLACE MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC DENSON, TROY 435 ISLAND OAKS PLACE MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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07/16/07-80003-020 150.00

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: Jennifer Denson President JENNIFER DENSON 7/16/07 321-406-0424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT Date Daytime Phone #