2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000156217

Entity Name

HAMILTON PLANNING CONSULTANTS, INC.



FILED Mar 17, 2008 08:00 AN Secretary of State

Principal Place of Business

MIAMI, FL 33186

SIGNATURE:

12901 S.W 132 AVE

Mailing Address

P.O. BOX 557035 MIAMI, FL 33255



DO NOT WRITE IN THIS SPACE

03142008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3827813

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIGNATURE AND TYPES OR PRINTED NAME OF SIG

DEL VALLE, IGNACIO G WEISS SEROTA HELFMAN PASTORIZA COLE & BOIN 2655 SOUTH BAYSHORE DRIVE STE 400 MIAMI, FL 33133

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.					
SIGNATURE					
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fine Trust Fund Contribution				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTORS				<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRADO, ANTONIO 12901 S.W 132 AVE MIAMI, FL 33188				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PRADO, CATALINA 12901 S.W. 132 AVE MIAMI, FL 33186				000000859199 04/02/08-80011-025 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET AODRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this tiling 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					

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 arm familiar with, and accept