2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000035827

1. Entity Name

HOLT COMMUNICATIONS, INC.



FILED Apr 02, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

5074 SW 161 AVENUE MIRAMAR, FL 33027 5074 SW 161 AVENUE MIRAMAR, FL 33027



DO NOT WRITE IN THIS SPACE

03282007 No Chg-P CR2E034 (11/05)

4. FEI Number 16-1754464 Applied For Not Applicable

5. Certificate of Status Desired

 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARLESTON-HOLT, YVETTE M 5074 SW 161 AVENUE MIRAMAR, FL 33027

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						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign In Trust Fund Contribution			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS			lu - 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARLESTON-HOLT, YVETTE M 5074 SW 161 AVENUE MIRAMAR, FL 33027				000000687309 04/10/07-80031-816 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					04/10/07-89031-016 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-S1-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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3/30/07 954.430.1727