

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000060165

FILED
Apr 30, 2007
Secretary of State

Entity Name: CERTIFIED HUSTLER, INC.

Current Principal Place of Business:

303 N 64TH AVE APT N
HOLLYWOOD, FL 33024

New Principal Place of Business:

8195 S.W. 140 AVE.
DUNNELLON, FL 34432

Current Mailing Address:

303 N 64TH AVE APT N
HOLLYWOOD, FL 33024

New Mailing Address:

8311 S.W. 5 STREET
APT.107
PEMBROKE PINES, FL 33025

FEI Number: 56-2609483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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: DP () Delete
Name: TAVAREZ, CESAR
Address: 303 N 64TH AVE APT N
City-St-Zip: HOLLYWOOD, FL 33024

Title: DT () Delete
Name: NEGRON, MARIA
Address: 8195 SW 140 AVE
City-St-Zip: DUNNELLON, FL 34432

Title: D () Delete
Name: TAVAREZ, RICARDO
Address: 5 DIVISION STREET
City-St-Zip: HAVERSTRAW, NY 10927

Title: V () Delete
Name: JACKSON, JAMES
Address: 5280 SE 24TH STREET
City-St-Zip: HOLLYWOOD, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CESAR A TAVAREZ

DP

04/30/2007

Electronic Signature of Signing Officer or Director

Date