## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P06000127266

FILED Jun 09, 2008 Secretary of State

Entity Name: HURRECON, INC **Current Principal Place of Business: New Principal Place of Business:** 9220 LEM TURNER RD JACKSONVILLE, FL 32208 **Current Mailing Address: New Mailing Address:** 9220 LEM TURNER RD JACKSONVILLE, FL 32208 FEI Number: 20-5630909 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EVANS, BRAD 4157 MCMILLIAN CIRCLE JACKSONVILLE, FL 32209 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRES ( ) Delete Title: (X) Change ( ) Addition MUWWAKKIL, ABDUL MUWWAKKIL, ABDUL Name: Name:

8348 NEWTON RD 8348 NEWTON RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216 Title: SEC Title: () Delete () Change () Addition Name: EVANS, BRAD Name: 4157 MCMILLIAN CIRCLE Address: Address:

Title: TRES ( ) Delete Title: ( ) Change ( ) Addition

City-St-Zip:

 Name:
 BLAINE, LATHELL N
 Name:

 Address:
 101 ALEXANDER RD
 Address:

 City-St-Zip:
 STARKE, FL 32091
 City-St-Zip:

JACKSONVILLE, FL 32209

City-St-Zip:

Title: OFF ( ) Delete Title: PRES (X) Change ( ) Addition

Name:MITCHELL, ESTELLARName:MITCHELL, ESTELLARAddress:8352 BYRON CTAddress:8352 BYRON CTCity-St-Zip:JACKSONVILLE, FL 32244City-St-Zip:JACKSONVILLE, FL 32244

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: ESTELLAR G MITCHELL PRES 06/09/2008