

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000025012

Entity Name: HINES IMPERIAL INC.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

3913 ROCINANTE BLVD #235  
TAMPA, FL 33613

## New Principal Place of Business:

5639 DEL PRADO DRIVE  
201  
TAMPA, FL 33617

## Current Mailing Address:

3913 ROCINANTE BLVD #235  
TAMPA, FL 33613

## New Mailing Address:

5639 DEL PRADO DRIVE  
201  
TAMPA, FL 33617

FEI Number: 20-8523746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HINES, CANDACE  
3913 ROCINANTE BLVD #235  
TAMPA, FL 33613 US

## Name and Address of New Registered Agent:

HINES, CANDACE  
5639 DEL PRADO DRIVE  
201  
TAMPA, FL 33617 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: CANDACE HINES

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: HINES, CANDACE  
Address: 3913 ROCINANTE BLVD #235  
City-St-Zip: TAMPA, FL 33613

Title: D ( ) Delete  
Name: HINES, CANDACE  
Address: 3913 ROCINANTE BLVD #235  
City-St-Zip: TAMPA, FL 33613

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: HINES, CANDACE  
Address: 5639 DEL PRADO DRIVE #201  
City-St-Zip: TAMPA, FL 33617

Title: D (X) Change ( ) Addition  
Name: HINES, CANDACE  
Address: 5639 DEL PRADO DRIVE #201  
City-St-Zip: TAMPA, FL 33617

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: CANDACE HINES

PVST

05/01/2008

Electronic Signature of Signing Officer or Director

Date