

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000105253

FILED
Jan 20, 2009
Secretary of State

Entity Name: HOT HATS, INC.

Current Principal Place of Business:

1240 GRAND CAYMAN DRIVE
MERRITT ISLAND, FL 32952

New Principal Place of Business:

752 BAYSIDE DRIVE
A502
CAPE CANAVERAL, FL 32920

Current Mailing Address:

1240 GRAND CAYMAN DRIVE
MERRITT ISLAND, FL 32952

New Mailing Address:

752 BAYSIDE DRIVE
A502
CAPE CANAVERAL, FL 32920

FEI Number: 14-2009256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAY, ELIZABETH
1240 GRAND CAYMAN DRIVE
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

MAY, ELIZABETH
752 BAYSIDE DRIVE
A502
CAPE CANAVERAL, FL 32920 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: _____

01/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: MAY, ELIZABETH
Address: 1240 GRAND CAYMAN DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: MAY, ELIZABETH
Address: 752 BAYSIDE DRIVE A502
City-St-Zip: CAPE CANAVERAL, FL 32920

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: ELIZABETH MAY

DPST

01/20/2009

Electronic Signature of Signing Officer or Director

Date