2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000003244

Entity Name: HARI OM ENTERPRISE OF CAPE CORAL INC

FILED May 31, 2011 Secretary of State

| Current Principal Place of Business: | | New Principal Place o | New Principal Place of Business: | |
|--|--------------------------------|-------------------------------|---|--|
| 1609 ANDALUSIA BLVD., CAPE CORAL, FL 33909 | UNIT 3 US | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 1609 ANDALUSIA BLVD., CAPE CORAL, FL 33909 | UNIT 3 US | | | |
| FEI Number: 27-1663862 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| SASI, RESMY 1609 ANDALUSIA BLVD., I CAPE CORAL, FL 33909 | UNIT 3 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 Ager | nt | Date | |
| | | | | |

OFFICERS AND DIRECTORS:

Title:

Name: SASI, RESMY

Address: 1609 ANDALUSIA BLVD., UNIT 3 City-St-Zip: CAPE CORAL, FL 33909 US

I hereby 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 all other like empowered.

SIGNATURE: RS P 05/31/2011