


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 18, 2005 8:00 am
Secretary of State

01-18-2005 90029 035 ***150.00

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| DOCUMENT # P22781 1. Entity Name HARVEST ENERGY, INC. |  |
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40001410

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| Principal Place of Business 1601 FORUM PLACE WEST PALM BEACH, FL 33402-4553 | Mailing Address 1601 FORUM PLACE WEST PALM BEACH, FL 33402-4553 |
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01132005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 51-0271062 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYES ST, STE 105 TALLAHASSEE, FL 32301 |
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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 10. OFFICERS AND DIRECTORS | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CEOP ACTON, BRIAN L 1601 FORUM PLACE SUITE P2 WEST PALM BEACH, FL 334024553 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD CALLAHAN, RICHARD 1601 FORUM PLACE P-2 W. PALM BEACH, FL 334018188 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T SHIPLEY, ZACHARY 1601 FORUM PLACE P-2 W. PALM BEACH, FL 334018188 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BLACK, LAWRENCE 718 FRANCIS DR. LAFAYETTE, CA 94549 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Richard P. Callahan, Secretary 1/13/05 561-697-4300**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #