2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000024306

FILED
Feb 20, 2008
Secretary of State

Entity Name: SEI HYPOLUXO ACQUISITION CORPORATION

Current Principal Place of Business:

1801 HYPOLIMO RD
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

701 WESTERN AVENUE
GLENDALE, CA 91201

New Mailing Address:

FEI Number: 95-4482074 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O C CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: HAVNER, RONALD L JR
Address: 701 WESTERN AVE
City-St-Zip: GLENDALE, CA 91201

Title: SVAS ( ) Delete
Name: REYES, JOHN CFO
Address: 701 WESTERN AVENUE
City-St-Zip: GLENDALE, CA 912012349

Title: SVS ( ) Delete
Name: GOLDBERG, DAVID
Address: 701 WESTERN AVENUE
City-St-Zip: GLENDALE, CA 912012349

Title: SVAS ( ) Delete
Name: GERICH, OBREN B
Address: 701 WESTERN AVENUE
City-St-Zip: GLENDALE, CA 912012349

Title: V ( ) Delete
Name: ADAMS, DREW
Address: 701 WESTERN AVE
City-St-Zip: GLENDALE, CA 91201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DREW ADAMS   VP   02/20/2008
Electronic Signature of Signing Officer or Director   Date