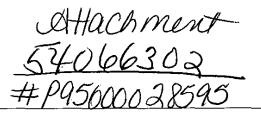
## FILED Aug 03, 2004 8:00 am Secretary of State

ANNUAL REPORT	<b>J</b> I'
	3

08-03-2004 90002 034 \*\*\*150.00 DOCUMENT # P95000028595 HUNTER RENO INC. Mailing Address Principal Place of Business 54066302 4095 ENSENADA AVE 4095 ENSENADA AVE COCONUT GROVE, FL 33133-6313 US COCONUT GROVE, FL 33133-6313 US Mailing Address - Chg-P\_\_\_\_\_ CR2E034 (10/03) -07282004 Applied For 4. FEI Number 13-3808146 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RENO, KARIN H. Street Address (P.O. Box Number is Not Acceptable) 4095 ENSENADA AVE COCONUT GROVE, FL 33133 City Zip Code 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, typed or printed hame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE Change ■ Addition ☐ Delete TITLE RENO, KARIN H NAME NAME STREET ADDRESS STREET ADDRESS 4095 ENSENADA AVE CITY-ST-ZIP COCONUT GROVE, FL 33133 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ■ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 true 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 SIGNATURE: TED NAME OF SIGNING OFFICER OR DIRECTOR

from the desk of **Hunter Reno** 



5305 SW 62 Avenue Miami, FL 33155 (305) 663-0616

July 28, 2004

RE: HUNTER RENO, INC.

TONTER RENO, INC.

- Request for leniency of late payment
- -- Change of address request----

## To Whom It May Concern:

I am requesting leniency for late payment of the annual report for my corporation and the acceptance of the enclosed late payment for the original amount of \$150.00. Due to a recent residential move in April and the arrival of our second child in early June, my payment to the Division Of Corporations has been delayed. I would be grateful for your understanding.

My new address is

Hunter Reno

Hunter Reno, Inc. 5305 SW 62 Ave Miami, Fl 33155 (305) 663-0616

Thank you in advance for your consideration.

Sincerely,

Huntel Keno