## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## FILED Jan 17, 2007 08:00 AM DOCUMENT # P95000043364 **Secretary of State** HOLLYWOOD SUPPLY CO., INC. Principal Place of Business Mailing Address 750 N DIXIE HWY 750 N DIXIE HWY HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 US 01132007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0585638 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent DEMOLINER, RICHARD DO NOT WRITE 750 N. DIXIE HWY HOLLYWOOD, FL 33020 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulred when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May-1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PSD-TITLE NAME DEMOLINER, RICHARD STREET ADDRESS 750 N. DIXIE HIGHWAY U00000589628 01/18/07-80022-022 150.00 CITY-ST-ZIP HOLLYWOOD, FL 33020 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 7ITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I arm 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.

CITY-ST-ZIP

SIGNATURE:	120			1-12-07	1-954-923-7336
BIGNATURE AN	TYPED OR PRINTED INCHE O	F SIGITING CE	EFFER OR DIRECTOR	Date	Daytime Phone #