## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State** DOCUMENT # P97000019451 01-12-2004 90026 035 \*\*\*150.00 **HEARTY INDUSTRY CORPORATION** Principal Place of Business Mailing Address 10033 9TH STREET NORTH 10033 9TH STREET NORTH 2400111R #108 #108 ST. PETERSBURG, FL 33716 ST. PETERSBURG, FL 33716 2. Principal Place of Business 3. Mailing Address 10033 M.L. King St. N. 8718 Orient Way NE Suite, Apt. #, etc. #108 Suite, Apt. #, etc. 01092004 CR2E034 (10/03) Chg-P City & State 4 FEI Number Applied For City & State 59-3445456 Not Applicable St. Petersburg, St. Petersburg, Country USA \$8.75 Additional 33702 33716 5. Certificate of Status Desired USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent David, LEE W. DAVID-LEE-W-Street Address (P.O. Box Number is Not Acceptable) 8718 Orient Way NE 10033 OTH ST N-108 #108~ ST\_PETERSBURG\_FL\_33716 Zip Code 33702 St. Petersburg, 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 8. The above nar the obligations 1/10/04 David Lee SIGNATURE egistered agent and title if applica (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 ... After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. cı XX Change ח ☐ Delete TITLE D TITLE LEE, David W. LEE, DAVID W NAME NAME STREET ADDRESS 10033 M.L.King Street N., #108 STREET ADDRESS 10033 9TH ST N 108 SAINT PETERSBURG, FL -337162336 CITY-ST-ZIP St. Petersburg, FL 33716 CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP the information is applied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information part 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 or the receiver of instee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if attachment with an address, with all other like empowered. 12. I hereby certify that the indicated on this teport of the corporation or the changed, or on an attack.

David Lee, President

INTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED Jan 12, 2004 8:00 am

727-579-4318

1/10/04