2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 07, 2005 08:00 AM Secretary of State **DOCUMENT # P97000045469** 1. Entity Name HATE ETCETERA, INC. Principal Place of Business Mailing Address 6455 NORTH FEDERAL HIGHWAY 6455 NORTH FEDERAL HIGHWAY BOCA RATON, FL 33487 BOCA RATON, FL 33487 US CR2E034 (10/03) No Chg-P DO NOT WRITE IN THIS SPACE 01072005 Applied For 4. FEI Number 65-0759976 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE GATTO, CARINA 2105 LAVERS CIRCLE **APT 408** IN THIS SPACE DELRAY BEACH, FL 33444 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 algorature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE NAME GATTO, CARINA 2105 LAVERS CIRCLE APT 408 STREET ADDRESS CITY-ST-ZIP DELRAY BEACH, FL 33444 TITLE NAME STREET ADDRESS CITY-ST-ZIP IM.E NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 received 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.

TED NAME OF SIGNING OFFICER OR DIRECTOR

FILED