2005 FOR PROFIT CORPORATION

Apr 07, 2005 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P97000052632 HIR INDUSTRIES, INC. Principal Place of Business Mailing Address 1953 NORTH FEDERAL HIGHWAY 1953 NORTH FEDERAL HIGHWAY BOCA RATON, FL 33432 BOCA RATON, FL 33432 04052005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0763062 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROTHAUSER, HOWARD I DO NOT WRITE 1953 NORTH FEDERAL HIGHWAY BOCA RATON, FL 33432 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 required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 U00000291248 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 04/07/05-80015-018 150.00 OFFICERS AND DIRECTORS 10. TITLE ROTHHAUSER, HOWARD I NAME STREET ADDRESS 1953 NORTH FEDERAL HWY CITY - ST-ZIP BOCA RATON, FL 33432 TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP

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12. I hereby certify that the Information supplied with this filling 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 trustee empowered. Per 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.

SIGNATURE:

TITLE

STREET ADDRESS CITY-ST-ZIP