2008 FOR PROFIT CORPORATION

ANNUAL REPORT **DOCUMENT # P98000023301**

HANS D REDDIES, INC.



Principal Place of Business

805 KNOLLWOOD COURT NAPLES, FL 34108

Mailing Address

805 KNOLLWOOD COURT NAPLES, FL 34108

FILED Apr 30, 2008 08:00 AN Secretary of State



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CR2E034 (11/05) 04252008 No Chg-P

4. FEI Number 59-3496008 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REDDIES, HANS D 805 KNOLLWOOD COURT NAPLES, FL 34108

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the obligations of registered agent.							
SIGNATURE	Signature, typed or printed name of registered agent and little in	fanolicable (NOTE Registered		required when reinstating)	DATE		
FIL After M	E NOW!!! FEE IS \$150.00	9. Election Campaign Financ		\$5.00 May Be Added to Fees			
10,	OFFICERS AND DIREC	PTORS					
TITLE	P ,	,10H3					
NAME STREET ADDRESS CITY-ST-ZIP	REDDIES, HANS D 805 KNOLLWOOD COURT NAPLES, FL 34108				U00000932704 05/22/08-80065-009 150.00		
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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 am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, 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 to execute this report as required by Chapter 607, 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 to execute this report as required by Chapter 607, 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 to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on this report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 119, Florida Statutes. I further certify that the information indicated on the receiver of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 119, Florida Statutes. I further the information indicated the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the r							