2004 FOR PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

## Apr 19, 2004 8:00 am Secretary of State ANNUAL REPORT (AR) DOCUMENT # P98000036593 ~ 04-19-2004 90267 019 \*\*\*150.00 HAGEN REALTY HOLDINGS, INC. Principal Place of Business Mailing Address 150 E PALMETTO PARK RD 150 E PALMETTO PARK RD 54036533 STE 330 STE 330 **BOCA RATON FL 33432 BOCA RATON FL 33432** 2. Principal Place of Business 3. Mailing Address 555 S. Federal 555\_<u>s.</u> Federal Huse Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) Suite 300 Suite 300 City & State City & State 4. FEI Number Applied For 65-0837936 Boca Ratan Boca Rotton エし Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA 33432 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent James KING, JAMES P 150 E PALMETTO PARK RD Street Address (F.O. Box Number is Not Acceptable) **STE 330 BOCA RATON FL 33432** 555 S. Federal City Boog Raton 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. 3 March 04 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Regis signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PTD TITLE Change Change ☐ Addition ☐ Delete King, James P. KING, JAMES P NAME NAME S. Federal Hwy. Suite 300 150 E PALMETTO PK RD STE 330 STREET ADDRESS STREET ADDRESS 555 LAKE WORTH FL 33-4632 CITY-ST-ZIP CITY-ST-ZIP Raton FL 33432 ☐ Delete TITLE **Change** Addition TITLE NAME SCHLUBACH, ANITA NAME schlubach, Anita 555 S. Féderal Huy, Suite 300 150 E PALMETTO PK RD STE 330 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33432** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME -STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 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 exponence.

FILED

3 March 104