## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## 01-26-2007 90044 006 \*\*\*158.75 DOCUMENT # P98000072023 H.R. ULVERUD CO. 66002935 Principal Place of Business Mailing Address 502 PALM ST, #21 502 PALM ST. #21 WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401 CR2E034 (11/05) 01162007 No Cha-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-6280135 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HALVERSON, JEFFREY DO NOT WRITE 2536 DORAL WAY WEST PALM BEACH, FL 33407 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 ageou 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS ITLE NUME HALVERSON, JEFF STREET ADDRESS 2536 DORAL WAY WEST PALM BEACH, FL 33407 CITY-ST-ZIP MLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO\_NOT WRITE GTY-ST-ZD\* IN THIS SPACE TITLE STREET ADDRESS CITY-SI-ZP time NAME STREET ADDRESS CITY-ST-ZIP MILE MALE STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this tiling does not qualify for the exemptions contained in Chapter 119. Floride 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 logal effect as if made under cath; that I em an officer or director of the corporation or the receiver or trustee empowered to exploit 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 SIGNATURE:

OFFICER OR OVERCTOR

FILED Feb 26, 2007 8:00 am

**Secretary of State**