2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Apr 25, 2008 08:00 AN Secretary of State **DOCUMENT # P99000050954** 1. Entity Name JAMES D. HARTNETT, INC. Principal Place of Business Mailing Address **510 MARMORE AVE** PO BOX 143712 MIAMI, FL 33114 MIAMI, FL 33146 01162008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0938868 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HARTNETT, JAMES D 510 MARMORE AVE MIAMI, FL 33146 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 rone DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 U000000921089 Trust Fund Contribution. Added to Fees 05/14/08-80071-002 150.00 OFFICERS AND DIRECTORS 10. TITLE NAME HARTNETT, JAMES D PO BOX 143712 STREET ADDRESS MIAMI, FL 33114 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE 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 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; and that my name appears in Block 10 or Block 11 if

NAME STREET ADDRESS CITY-ST-ZIP