2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 27, 2006 8:00 am Secretary of State

| DOCUMENT # P99000089549 1. Entity Name HILL'S ALL SERVICE, INC. | | | | | | 01-27-2006 | 5 90022 (|)38 ***1: | 50.00 | |
|---|----------------------|---|--|-----------------------|---|-------------------|--------------|-------------------------------------|--|--|
| Principal Place of Business PO BOX 77221 JACKSONVILLE, FL 32226-7221 US | (77221 PO BOX 77221 | | | | | | | | | |
| Principal Place of Business 3. Mailing Address | | | | | | | | | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | 01242006 | Chg-P | CR2E0 | 34 (11/05) | | | |
| City & State City & State | | | | 4. FEI Number 59-3627 | | | | oplied For ot Applicable | | |
| Zip Country | Zip | Coun | itry | | 5. Certificate o | f Status Desired | | \$8.75 Add Fee Require | | |
| 6. Name and Address of Curr | ent Registered Agent | | | | 7. Name and A | ddress of New R | legistered A | \gent | | |
| BRYANT, JOHN N ESQ. 233 EAST BAY ST., STE. 1101 JACKSONVILLE, FL 32202 | | | Name | Name | | | | | | |
| | | | Street Ad | ddress (F | O. Box Number | is Not Acceptable | 9) | | | |
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| | | | City | | | | FL | Zip Cod | е | |
| 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 | | | | | | | | | | |
| FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | | | | | | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$55 | | | | \$5. 1 Adde | 00 May Be d to Fees | | | | | |
| After May 1, 2006 Fee will be \$55 | | | | \$5. (| | HANGES TO OFF | CERS AND | DIRECTOR: | S IN 11 | |
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inclicated 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 empowered.

| SIGNATURE: MA | Meare | 4. Hill Mark E. Hill | 01/24/06 | (904)757-1331 |
|--|-------|----------------------|----------|-------------------|
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | | Date | e Daytime Phone # |