2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowered.

FOR LIVE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 29, 2005 08:00 AM Secretary of State DOCUMENT # V27999 1. Entity Name FORTUNE HALL INTERNATIONAL, INC. Principal Place of Business Mailing Address 3102 42ND AVE E 3102 42ND AVE E **BRADENTON FL 34208** BRADENTON FL 34208 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E034 (10/04) City & State Applied For City & State 4. FEI Number 65-0325697 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HALL, FORTUNATA R. Street Address (P.O. Box Number is Not Acceptable) 3102 42ND AVE E **BRADENTON FL 34208** Zip Code 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 Spratte, typed or printed name of registered agent and title it applicable NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE Change Addition Delete HALL, FORTUNATA R. NAME NAME 1100000343642 3102 42ND AVE E STREET ADDRESS STREET ADDRESS 04/29/05-80104-015 150.00 **BRADENTON FL 34208** CITY-ST-ZIP CITY - ST - ZIP ☐ Delete Change TITLE TITLE Addition NAME HALL, GODFREY R. NAME 3102 42ND AVE E STREET ADDRESS STREET ADDRESS **BRADENTON FL 34208** CITY-ST-ZIP CITY - ST - ZIP JJJ1E Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-ST-ZIP Change TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-ZIP TITLE ☐ Delete THEF Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CHY-ST-ZIP TITLE Delete TABLE ☐ Change 🔲 Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7P 12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section (19.07(3)(1)), 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 eath, 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

4/27/03 Date

Daytime Phone #

FILED