2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 09, 2007 8:00 am Secretary of State DOCUMENT # V27999 1. Entity Name 05-09-2007 90107 004 ***150 00 FORTUNE HALL INTERNATIONAL, INC. Principal Place of Business Mailing Address 3102 42ND AVE E BRADENTON FL 34208 3102 42ND AVE E **BRADENTON FL 34208** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Bentquaes 5601 Bentquess CR2E034 (10/06) 1st MOORE City & State 4. FEI Number Applied For 65-0325697 areso Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired USA 41.5 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HALL, FORTUNATA R. 3102 42ND AVE E Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34208** Zip Code FL 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 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, 2007 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 11. ЩЕ ☐ Delete ME ☐ Change ☐ Addition HALL, FORTUNATA R. NAME NAME 3102 42ND AVE E STREET ADORESS STREET ADDRESS **BRADENTON FL 34208** CITY-ST-ZIP CHY-ST-ZIP $\overline{\mathbf{n}}$ TITLE □ Delete IIILE ☐ Change ☐ Addition HALL, GODFREY R. NAME NAME 3102 42ND AVE E STREET ADDRESS STREET ADDRESS **BRADENTON FL 34208** CITY-ST-7IP CITY-ST-7IP Delele TITLE TITLE Change ☐ Addition NAME NAMÉ STRUET ADDRESS STREET ADDRESS CITY. CT. 7IP ary_21-7/P TITLE Delete THLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-S1-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-SI-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 changed, or on an attachment with an address, with all other like empowered.

FILED

Daytime Phone #