

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

03-28-2008 90028 042 ***150.00

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| DOCUMENT # V36009 1. Entity Name WARRICK CUSTOM HOBBIES OF PLANTATION, INC. | | | |
| Principal Place of Business C/O 2455 E. SUNRISE BLVD FT. LAUDERDALE, FL 33304 — US | | Mailing Address C/O H. VENIS 2455 E. SUNRISE BLVD, FT. LAUDERDALE, FL 33304 — US | |
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | | 3. Mailing Address 4360 PETERS ROAD Suite, Apt. #, etc. | |
| City & State FT. LAUDERDALE FL | | 4. FEI Number APPLIED FOR 65-0473905 | |
| Zip 33317 | | Country USA | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | 03192008 Chg-P CR2E034 (12/06) | |
| 6. Name and Address of Current Registered Agent VENIS, HARRY 2455 E. SUNRISE BLVD PENTHOUSE NORTH FT. LAUDERDALE, FL 33304 | | 7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____ | | | |
| FILE NOW!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DP WARRICK, PETER 4360 PETERS RD FORT LAUDERDALE, FL 33317 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with an other like empowered.