

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Apr 18, 2005
Secretary of State**

DOCUMENT# P04000049141

Entity Name: HAMMER'S HAWGS CUSTOM MOTORCYCLES, INC.

Current Principal Place of Business:

7002 S.R. 54
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

Current Mailing Address:

7002 S.R. 54
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

FEI Number: 20-1454492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOLAN, MICHAEL
9301 LEDGESTONE LANE
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: NOLAN, MICHAEL
Address: 9301 LEDGESTONE LANE
City-St-Zip: PORT RICHEY, FL 34668 US

Title: CEO () Delete
Name: NOLAN, TERI L
Address: 9301 LEDGESTONE LANE
City-St-Zip: PORT RICHEY, FL 34668

Title: TREA (X) Delete
Name: NOLAN, MARTIN J JR.
Address: 9620 APPLE MILL DRIVE
City-St-Zip: ELK GROVE DRIVE, CA 95624

Title: VP (X) Delete
Name: HAUSER, ERIC
Address: 1809 DIANE DRIVE
City-St-Zip: CLEARWATER, FL 33759

Title: O (X) Delete
Name: CINQUEMANI, DAN
Address: 3611 DELLEFIELD STREET
City-St-Zip: NEW PORT RICHEY, FL 34653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL A. NOLAN

PRES

04/18/2005

Electronic Signature of Signing Officer or Director

_____ Date