2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003978

Entity Name: HANNOUSH JEWELERS, INC.

FILED Jun 23, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
134 CAPITAL DRIVE WEST SPRINGFIELD, MA 01089					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
134 CAPITAL DRIVE WEST SPRINGFIELD, MA 01089					
FEI Number: 04-2706327 FEI Number Applied For () FEI Nu			FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ZACHODNY, JOHN 8201 SOUTH TAMIAMI TRAIL SARASOTA SQUARE MALL SARASOTA, FL 34238 US					
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	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	V () E HANNOUSH, PET 521 BIRNIE AVE WEST SPRINGFI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () C HANNOUSH, NOF 100 FORESTRID WEST SPRINGFI	GE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () C HANNOUSH, ANT 49 HANNOUSH D WEST SPRINGFI	RIVE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	V () E HANNOUSH, GEC 33 HANNOUSH D WEST SPRINGFI	RIVE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	V () E HANNOUSH, CAM 227 HANNOUSH I WEST SPRINGFI	DRIVE	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	VP () C HANNOUSH, NAB 52 PHEASANT CF WEST SPRINGFI	ROSSING	Title: Name: Address: City-St-Zip:	() Change() Addition	
I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: NORMAN A HANNOUSH

T 06/23/2006