## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000002463

FILED Apr 22, 2004 Secretary of State

Entity Nam	IE: HAHT CC	MMERCE, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
400 NEWTON ROAD RALEIGH, NC 27615			SUITE 20	3200 ATLANTIC AVE SUITE 204 RALEIGH, NC 27604			
Current Ma	ailing Addres	s:	New Mai	New Mailing Address:			
400 NEWTO RALEIGH, N			SUITE 20	ANTIC AVE )4 I, NC 27615			
FEI Number:	56-1929876	FEI Number Applied For()	FEI Number Not Ap	plicable ( )	Certificate of Status I	Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name an	Name and Address of New Registered Agent:			
1200 SOUT PLANTATION The above it		ND ROAD	irpose of changing	g its registered	office or registered a	gent, or both,	
in the State							
SIGNATUR		is Cianatura of Dagistarad Assa	<b>.</b> 1		 Date		
Election Cam		ic Signature of Registered Ager	ıı		Date		
OFFICERS	AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () THOMAS, TOM 400 NEWTON F RALEIGH, NC	Delete	Title: Name: Address: City-St-Zip:	GREENFIELD 100 EDISON			
Title: Name: Address: City-St-Zip:	V () RIEHLE, NICK 400 NEWTON F RALEIGH, NC	Delete	Title: Name: Address: City-St-Zip:	EDWARDS, N 100 EDISON			
Title: Name: Address: City-St-Zip:	S () ARCHER, ROW 400 NEWTON F RALEIGH, NC		Title: Name: Address: City-St-Zip:	ARCHER, RO 3200 ATLANT	TIC AVE SUITE 204		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	HUNTER, BRÌ 100 EDISON			
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	GOLDBERG, 100 EDISON			

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: ROLAND ARCHER CTO 04/22/2004