2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005330

Title:

Name:

Address:

City-St-Zip:

FILED Apr 27, 2006 Secretary of State

Entity Nai	me: TWIN HII	LL ACQUISITION COMPANY, I	NC.				
Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:			
40650 ENCYCLOPEDIA CIR FREMONT, CA 94538				40650 ENCYCLOPEDIA CIRCLE FREMONT, CA 94538			
Current M	lailing Addres	ss:	New Mail	New Mailing Address:			
5803 GLEI HOUSTOI	NMONT N, TX 77081						
FEI Number	: 94-3413350	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired	()	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1200 SOU	PORATION SY TH PINE ISLA ION, FL 33324	ND ROAD					
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing	its registered	office or registered agent, or	r both,	
SIGNATUI	RE:						
	Electron	nic Signature of Registered Age	ent	Date			
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICER	S AND DIREC	TORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	C (ZIMMER, GEO 40650 ENCYC FREMONT, CA	_OPEDIA CIR	Title: Name: Address: City-St-Zip:	ZIMMER, GE	CLOPEDIA CIRCLE		
Title: Name: Address: City-St-Zip:	P (MARSHALL, JE 5803 GLENMO HOUSTON, TX	NT DRIVE	Title: Name: Address: City-St-Zip:	WECKSLER,	CLOPEDIA CIRCLE		
Title: Name: Address: City-St-Zip:	T (PRUITT, CLAU 5803 GLENMO HOUSTON, TX	NT DRIVE	Title: Name: Address: City-St-Zip:	VP (PRUITT, CLAU 5803 GLENM HOUSTON, T)	ONT DRIVE		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CLAUDIA PRUITT VP 04/27/2006

() Delete

WILSON, DIANA

5803 GLENMONT DRIVE

HOUSTON, TX 77081

() Change () Addition