

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006605

Entity Name: HAZERA SEEDS, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

2255 GLADES ROAD, SUITE 123A
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2255 GLADES ROAD, SUITE 123A
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 52-2183286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, JOSE F
2255 GLADES ROAD, SUITE 123A
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

GIRAS, YARON
12591 NW 57 PLACE
CORAL SPRINGS, FL 33076 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: YARON GIRAS

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: DAR, RAMI
Address: BRURIM M.P.
City-St-Zip: SHIKMIM ISREAL, 79837

Title: D () Delete
Name: IMBAR, MENASHE
Address: BRURIM M.P.
City-St-Zip: SHIKMIM ISREAL, 79837

Title: D () Delete
Name: MANOR, AMI
Address: BRURIM M.P.
City-St-Zip: SHIKMIM ISREAL, 79837

Title: S () Delete
Name: OLSHANSKY, YEHUDA
Address: BRURIM M.P.
City-St-Zip: SHIKMIM ISREAL, 79837

Title: PT (X) Delete
Name: GOMEZ, JOSE F
Address: 2255 GLADES ROAD, SUITE 123A
City-St-Zip: BOCA RATON, FL 33431

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 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: RAMI DAR

C

04/28/2006

Electronic Signature of Signing Officer or Director

Date