

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 28, 2006 8:00 am
Secretary of State

08-28-2006 90006 028 ***150.00

DOCUMENT # F98000004908 1. Entity Name HAMON CUSTODIS, INC.	
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Principal Place of Business 58-72 EAST MAIN STREET SOMERVILLE, NJ 08876	Mailing Address P.O. BOX 1500 SOMERVILLE, NJ 08876
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20053711



08232006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-3595109	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOBEL, ART 58-72 EAST MAIN STREET SOMERVILLE, NJ 08876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ACHESON, OLIVER 58-72 EAST MAIN STREET SOMERVILLE, NJ 08876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BOONE, JOHN 58-72 EAST MAIN STREET SOMERVILLE, NJ 08876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GILBERT, JEAN 1060 BRUSSELS BELGIUM,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MESEROLL, JAMES 58-72 EAST MAIN STREET SOMERVILLE, NJ 08876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James K. Meseroll James K. Meseroll 8/23/06 9083332081
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



ATTACHMENT
HAMON CUSTODIS, INC.

20053711

#F98000004908

August 24, 2006

Florida Department of State
Division of Corporations
PO Box 6198
Tallahassee, Florida 32314

FEI Number 22-3595109

RE: 2006 Annual Report

Gentlemen,

On August 23rd I placed a called to the Office of the Florida Secretary of State because Hamon Custodis, Inc. had not received our 2006 annual report. We have since received our completed annual report which is enclosed along with the \$150 annual fee.

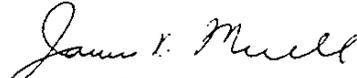
The purpose of this letter is to request a one-time waiver of the \$400 penalty since the annual report previously was not received, and Hamon Custodis made the initial effort of contacting the Office of the Secretary of State to discuss this matter to insure the proper paperwork be filed expeditiously.

We trust the Office of the Secretary of State will be considerate, and agree to our one-time request that the \$400 penalty be waived. Thank you for your time and consideration.

If any additional information is needed, please contact me directly at (908) 333 – 2081.

Respectfully,

Hamon Custodis


James K. Meseroll

Controller