2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H32448

Entity Name: HOSE & HYDRAULICS, INCORPORATED

FILED Jan 10, 2006 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

C/O NORMAN DEAN BEACH
504 S MYRTLE AVE
504 S MYRTLE AVE

CLEARWATER, FL 346165614 CLEARWATER, FL 337565614

Current Mailing Address: New Mailing Address:

C/O NORMAN DEAN BEACH
504 S MYRTLE AVE
CLEARWATER, FL 346165614

C/O JON W. BONIN
504 S MYRTLE AVE
CLEARWATER, FL 337565614

FEI Number: 59-2471527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BEACH, NORMAN DEAN
504 S MYRTLE AVE
CLEARWATER, FL 34616 US

BONIN, JON WAYNE
504 S MYRTLE AVE
CLEARWATER, FL 33756 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: JON W. BONIN 01/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: P (X) Change () Addition Name: BEACH, NORMAN D Name: BONIN, JON W

 Name:
 BEACH, NORMAN D
 Name:
 BONIN, JON W

 Address:
 1290 LAKEVIEW RD #301
 Address:
 2157 BRADFORD ST.

 City-St-Zip:
 CLEARWATER, FL 33756
 City-St-Zip:
 CLEARWATER, FL 33760

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 BONIN, JON W
 Name:
 BONIN, JASON J

 Address:
 2157 BRADFORD ST
 Address:
 739 STONEHENGE WAY

 City-St-Zip:
 CLEARWATER, FL 33760
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: () Delete Title: VP/S () Change (X) Addition

 Name:
 Name:
 BONIN, JENNIFER A

 Address:
 Address:
 739 STONEHENGE WAY

 City-St-Zip:
 City-St-Zip:
 PALM HARBOR, FL 34683

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: JON W. BONIN PRES 01/10/2006