

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007095

Entity Name: H.A.S.O., INC.

FILED
Sep 21, 2004
Secretary of State

Current Principal Place of Business:

5474 CAURUS CT.
ORLANDO, FL 32808 US

New Principal Place of Business:

5342 FOX RIDGE TRL
ORLANDO, FL 32818 US

Current Mailing Address:

P.O. BOX 580744
ORLANDO, FL 32858 US

New Mailing Address:

FEI Number: 20-0169470 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLIN, RIGAUD
5474 CAURUS CT.
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

PREVAL, LIZETTE
5342 FOX RIDGE TRL
ORLANDO, FL 32818 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: PREVAL LIZETTE

09/21/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COLIN, RIGAUD
Address: 5474 CAURUS CT
City-St-Zip: ORLANDO, FL 32808 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VILBRUN, GERTRUDE
Address: 308 LANCER OAK DR.
City-St-Zip: APOPKA, FL 32712 US

Title: VP () Change (X) Addition
Name: MARCELIN, IRMA
Address: 2415 WEYMOUTH CT.
City-St-Zip: KISSIMMEE, FL 34743

Title: S () Change (X) Addition
Name: PREVAL, LIZETTE
Address: 5342 FOX RIDGE TRL.
City-St-Zip: ORLANDO, FL 32818

Title: T () Change (X) Addition
Name: LEBLANC, JEAN
Address: 7006 VICARAGE CT.
City-St-Zip: ORLANDO, FL 32818

Title: L () Change (X) Addition
Name: DANTES, CAROLE
Address: 4980 N. LANE APT# 800
City-St-Zip: ORLANDO, FL 32808

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PREVAL LIZETTE

S

09/21/2004

Electronic Signature of Signing Officer or Director

Date