

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007095

FILED
Mar 31, 2006
Secretary of State

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

Current Principal Place of Business:

7006 VICARAGE CT
ORLANDO, FL 32818 US

New Principal Place of Business:

13825 MAGNOLIA GLEN CIRCLE
ORLANDO, FL 32828 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:

LEBLANC, JEAN
7006 VICARAGE CT
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

TELUSMA, SAMUEL
13825 MAGNOLIA GLEN CIRCLE
ORLANDO, FL 32828 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: SAMUEL TELUSMA

03/31/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COMPAS, BRUNY
Address: 5212 ASHWOOD PL.
City-St-Zip: ORLANDO, FL 32808 US

Title: VP () Delete
Name: LEBLANC, NICOLE
Address: 7006 VICARAGE CT
City-St-Zip: ORLANDO, FL 32818

Title: S () Delete
Name: LEBLANC, JEAN
Address: 7006 VICARAGE CT
City-St-Zip: ORLANDO, FL 32818

Title: T () Delete
Name: ALPHONSE, CLAUDY
Address: 2185 WINDCREST CT
City-St-Zip: ORLANDO, FL 32824

Title: L () Delete
Name: DANTES, YVON
Address: 4980 N. LANE APT# 800
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JAKUES, MAX H.
Address: 553 CALIBRE CREST PKWY #103
City-St-Zip: ALTAMONTE SPGS, FL 32714 US

Title: VP (X) Change () Addition
Name: JACQUES, MAX H.
Address: 1621 STERNS DR
City-St-Zip: LEESBURG, FL 34748

Title: S (X) Change () Addition
Name: TELUSMA, SAMUEL
Address: 13825 MAGOLIA GLEN CIRCLE
City-St-Zip: ORLANDO, FL 32828

Title: T (X) Change () Addition
Name: COMPAS, PAULE MARIE
Address: 5212 ASHWOOD PLACE
City-St-Zip: ORLANDO, FL 32808

Title: L (X) Change () Addition
Name: PHITO, MARCELIN
Address: 2415 WEYMOUTH
City-St-Zip: KISSIMMEE, FL 34743

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

SIGNATURE: JACQUES MAX H.

P

03/31/2006

Electronic Signature of Signing Officer or Director

Date