2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2006
Secretary of State

DOCUMENT# N94000001942

Entity Name: HEAR MY HANDS INCORPORATED

Current Principal Place of Business:

5076 ERNST COURT
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

5076 ERNST COURT
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 65-0491604 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VIGON, SUZIE
5076 ERNST COURT
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: VIGON, SUZIE
Address: 5076 ERNST CT.
City-St-Zip: ORLANDO, FL 32819

Title: D ( ) Delete
Name: PUGH, ANGELA
Address: 5244 WATER VISTA DR
City-St-Zip: ORLANDO, FL 32921

Title: DVP ( ) Delete
Name: LITRENTA, KATHERINE
Address: 4325 PALO VERDE DR.
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete
Name: SICILIANO, TERI
Address: 145 SPRING LAKE HILL DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D ( ) Delete
Name: SIMMONS, MARIA
Address: 5460 NORTH STATE ROAD 7 SUITE 110
City-St-Zip: FORT LAUDERDALE, FL 33319

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: D (X) Change ( ) Addition
Name: VIGON, FRANCES A
Address: 6157 WINDING LAKE DR
City-St-Zip: JUPITER, FL 33458 US

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: SUZIE VIGON PRES 06/08/2006
Electronic Signature of Signing Officer or Director — Date